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ANNUAL REPORT

OF
THE MEDICAL OFFICER OF HEALTH
AND
THE CHIEF PUBLIC HEALTH INSPECTOR
FOR THE YEAR ENDED
31st DECEMBER, 1956

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FOR THE YEAR ENDED 31st. DEC.,
1956

R. W. FARQUHAR, B.Sc.(Agri.), M.B., Ch.B., D.P.H.

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Public Health Department,
Thurnham Street,
Lancaster.

TO THE CHAIRMAN AND MEMBERS OF
THE PUBLIC HEALTH COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour of presenting for your consideration my Annual Report on the health services of the City during 1956.

In form and content the report follows the general lines laid down by the Ministry of Health and the main purpose of this preamble is to emphasise certain points which are considered worthy of special attention.

The estimated population of the City at mid-year 1956 was 49,530, a decrease of 220 from the previous year, and 2,131 or 4.1% less than the 1951 census figure of 51,661. The greater part of this estimated loss must be attributed to migration.

The mortality rate of infants under one year of age was 27 per 1,000 live births, the lowest rate so far recorded in this City. The more favourable trend of infant mortality in the last two years can be seen in Table 6, which compares the rates in Lancaster and other areas over the past eleven years.

In 1956 one death was classified to " pregnancy, childbirth and abortion." A long term view of maternal mortality is provided in Table 5, which indicates that the average mortality in the City between 1946 and 1955 was 36 per cent. above the corresponding figure for the Administrative County.

The general health of the community remained satisfactory throughout the year, with a lower than usual incidence of infectious diseases. Full advantage should be taken of the immunisation and vaccination schemes described in Section "C". The pattern of infectious diseases continues to change and the fears once engendered by diphtheria and scarlet fever are now aroused by virus diseases such as poliomyelitis and influenza; typhoid fever has ceased to menace the health of the ordinary household but illnesses caused by other bowel organisms, namely, dysentery and food poisoning, have become increasingly common in the last decade.

In 1956 there were 6 deaths from respiratory tuberculosis, the lowest number on record, and this was the first year also in which no deaths were recorded from non-respiratory tuberculosis. The fall in the notification rate of respiratory tuberculosis continues to lag behind the fall in the death rate, as will be seen from the graph in the body of the report.

The Public Health Inspectors, like the Medical Officer of Health, are concerned with people and how they live, and the valuable work they do day by day in maintaining and improving living and working conditions will be evident from a perusal of the section on environmental health.

The end of the year arrived, however, with several pressing problems in this field very little nearer solution, amongst which may be mentioned slum clearance and redevelopment, the repair and improvement of older houses to delay the further growth of slums, and the improvement or rebuilding of unsuitable food premises owned or controlled by the City Council. All these schemes have been carefully considered by the Council but their competing claims need to be kept under frequent review in the light of changing economic circumstances.

The Chief Public Health Inspector has also drawn attention to the conditions of some 900 people living in rooms. Included in these are a number of unsatisfactory or so-called problem families who do not conform to the normal social pattern, despite every help being given to them. The work of helping and supervising these families is often frustrating and unrewarding, but it is felt that the conferences, held periodically under the chairmanship of your Medical Officer of Health, to co-ordinate the efforts of both statutory and voluntary organisations in this field have been worthwhile.

I take this opportunity of expressing my appreciation of the conscientious work of the Health Department staff and my pleasure in the continued interest and support of the Health Committee in its work.

Yours faithfully,

R. W. FARQUHAR,

Medical Officer of Health.

SECTION " A "

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

SUMMARY OF STATISTICS — 1956

Area (in acres)	5,036
Population (Registrar-General's Estimate) mid-year 1956	49,530
Number of Inhabited Houses according to Rate Books	14,175
Rateable Value	£582,395
Sum represented by a Penny Rate	£2,382

LIVE BIRTHS	*Males*	*Females*	*Total*
Legitimate	316	302	618
Illegitimate	18	19	37
	334	321	655

Crude Birth Rate per 1,000 of the estimated population . 13.2

STILL BIRTHS	*Males*	*Females*	*Total*
Legitimate	2	4	6
Illegitimate	1	—	1
	3	4	7

Still Birth Rate per 1,000 total (live and still) births ... 11

	Males	*Females*	*Total*
DEATHS (Total)	331	419	750

Crude Death Rate per 1,000 of the estimated population 15.1

DEATHS FROM MATERNAL CAUSES ... 1

Maternal Mortality Rate per 1,000 total (live and still) births ... 1.51

DEATHS OF INFANTS UNDER ONE YEAR OF AGE	*Males*	*Females*	*Total*
Legitimate	10	6	16
Illegitimate	—	2	2
	10	8	18

Infant Mortality Rate per 1,000 live births ... 27

DEATHS OF INFANTS UNDER 4 WEEKS OF AGE	*Males*	*Females*	*Total*
Legitimate	3	5	8
Illegitimate	—	2	2
	3	7	10

Neo-Natal Mortality Rate per 1,000 live births ... 15

DEATHS FROM CERTAIN SPECIFIED DISEASES	*Deaths*	*Rate per* 1,000 *est. population*
Cancer (all forms)	124	2.50
Tuberculosis (respiratory)	6	0.12

Table 1

DEATHS IN THE CITY OF LANCASTER DURING 1956

CLASSIFIED BY CAUSE AND SEX

Causes	*Males*	*Females*	*Total*
Tuberculosis, Respiratory	5	1	6
Tuberculosis, Other	—	—	—
Syphilitic Disease	1	1	2
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other Infective and Parasitic Diseases	—	1	1
Malignant Neoplasm, Stomach	14	10	24
Malignant Neoplasm, Lung, Bronchus	13	3	16
Malignant Neoplasm, Breast	—	13	13
Malignant Neoplasm, Uterus	—	9	9
Other Malignant and Lymphatic Neoplasms ...	29	30	59
Leukaemia, Aleukaemia	1	2	3
Diabetes	1	1	2
Vascular Lesions of Nervous System	28	89	117
Coronary Disease, Angina	73	51	124
Hypertension with Heart Disease	6	8	14
Other Heart Disease	42	78	120
Other Circulatory Disease	16	16	32
Influenza	2	5	7
Pneumonia	25	25	50
Bronchitis	14	6	20
Other Diseases of Respiratory System	2	3	5
Ulcer of Stomach and Duodenum	6	3	9
Gastritis, Enteritis, and Diarrhoea	1	—	1
Nephritis and Nephrosis	1	7	8
Hyperplasia of Prostate	4	—	4
Pregnancy, Childbirth, Abortion	—	1	1
Congenital Malformations	2	2	4
Other Defined and Ill-defined Diseases	32	41	73
Motor Vehicle Accidents	2	5	7
All Other Accidents	7	4	11
Suicide	4	4	8
Homicide and Operations of War	—	—	—
TOTAL DEATHS FROM ALL CAUSES	331	419	750

Table 2

DEATHS CLASSIFIED BY AGE GROUP AND LOCALITY—1956

WARD	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65-75	75-80	80+	Total.
Castle	2	—	—	—	—	—	—	—	—	—	12	11	8	12	45
John o'Gaunt	4	—	—	—	—	—	—	—	2	2	20	20	19	19	86
Park	2	1	—	—	—	—	—	2	2	6	52	75	47	62	249*
Queen's	1	—	—	—	—	—	—	—	1	2	16	21	16	18	75
St. Anne's	—	—	—	—	—	—	—	—	—	2	8	12	10	10	42
Scotforth	3	—	—	—	—	—	—	1	3	5	15	16	18	22	83
Skerton East	5	—	—	—	—	1	1	1	2	3	11	25	16	16	81
Skerton West	1	—	—	—	—	—	—	—	3	2	21	20	15	27	89
Total	18	1	—	—	—	1	1	4	13	22	155	200	149	186	750

*Includes 207 deaths assigned to the City which occurred in Lancaster Moor Hospital and Bay View.

Table 3

LANCASTER VITAL STATISTICS FOR 1956 AND THE PERIOD 1951 - 1955

Mid-year	Estimated Home Population	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
										Total		Neo-natal	
		No. Regis-tered	Rate per 1,000 pop'n	No. Regis-tered	Rate per 1,000 pop'n	No. regis-tered	Rate per 1,000 total births	No of deaths regis-tered	Rate per 1,000 total births	No. of deaths regis-tered	Rate per 1,000 Live births.	No. of deaths regis-tered	Rate per 1,000 Live births.
1956	49,530	655	*13·2	750	*15·1	7	11	1	1·51	18	27	10	15
1955	49,750	709	14·3	763	15·3	15	21	1	1·38	23	32	13	18
1954	49,910	636	12·7	689	13·8	15	23	—	—	28	44	21	33
1953	50,330	744	14·8	771	15·3	22	29	3	3·92	24	32	18	24
1952	50,590	738	14·6	652	12·9	13	17	1	1·33	32	43	26	35
1951	51,220	730	14·3	643	12·6	19	25	1	1·34	28	38	21	29
Average 5 years 1951—1955		—	14·1	—	14·0	—	23	—	1·59	—	38	—	28
Average 10 years 1946—1955		—	15·2	—	12·6	—	23	—	1·47	—	38	—	—

*Adjusted live birth-rate (comparability factor 1.03 = 13.6 per 1,000).

*Adjusted death-rate (comparability factor 0.79 = 12.0 per 1,000).

Table 4

COMPARATIVE STATEMENT OF VITAL STATISTICS, 1956

Birth and death-rates for England and Wales, the Administrative County of Lancaster, and 160 Great Towns and 160 Smaller Towns and Lancaster M.B. for the year 1956

(*Note: Figures other than those for the Administrative County and Lancaster M.B. are provisional only and are based on the Registrar-General's Weekly and Quarterly Returns*).

	England & Wales		160 Great Towns		160 Smaller Towns		Admin. County of Lancs.		Lancaster M.B.	
stimated home population mid-1955	44,667,000		23,139,040		5,910,910		2,091,000		49,530	
	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1.000 home pop'n
IRTHS										
Live births	699,059	15.7	361,762	15.6	91,990	15.6	31,857	15.24	655	13.2
								15.69 (a)		13.6 (a)
Stillbirths	16,431	0.37	8,504	0.37	2,136	0.36	853	0.41	7	0.14
		23.0 (b)		23.0 (b)		22.7 (b)		26.0 (b)		11.0 (b)
EATHS										
All causes	521,402	11.7	267,703	11.6	68,407	11.6	26,598	12.72	750	15.1
								13.74 (a)		12.0 (a)
Tuberculosis (all forms)	5,373	0.12	3,139	0.14	650	0.11	259	0.12	6	0.12
Respiratory	4,851	0.11	*	*	*	*	235	0.11	6	0.12
Non-respiratory	522	0.01	*	*	*	*	24	0.01	—	—
Cancer (all forms)	92,701	2.08	*	*	*	*	4,362	2.09	124	2.50
Lung bronchus	18,185	0.41	10,857	0.47	2,321	0.39	812	0.39	16	.32
Other cancer	74,516	1.67	*	*	*	*	3,550	1.70	108	2.18
Maternal Mortality (total)	401	0.56 (b)	*	*	*	*	19	0.58 (b)	1	1.51 (b)
Maternal causes (ex. abortion)	330	0.46 (b)	*	*	*	*	16	0.49 (b)	1	1.51 (b)
Due to abortion	71	0.10 (b)	*	*	*	*	3	0.09 (b)	—	—
Infant Mortality	16,471	23.8 (c)	8,633	24.0 (c)	2,204	24.1 (c)	867	27 (d)	18	27 (d)
Neo-natal Mortality	11,780	16.9 (c)	*	*	*	*	613	19 (d)	10	15 (d)

(a) Adjusted rate for purposes of comparison with adjusted rate of any other area or crude rate for England and Wales.

(b) Per 1,000 total (live and still) births.

(c) Per 1,000 related live births.

(d) Per 1,000 live births.

* Not available.

COMMENTS ON VITAL STATISTICS

Population

The Registrar-General's estimate of the home population at mid-year 1956 was 49,530, a decrease of 220 from the 1955 figure. The population at the 1951 census was 51,661 and since then the estimated figures have indicated a fairly steady decline each year, amounting in total to a loss in population of 2,131 or 4.1%.

The excess of deaths over live births during this same period of years is sufficient to account for only a small part of the estimated decrease in the population of the City, which must therefore mainly be attributed to migration.

Births

In 1956 there were 655 registered live births, 54 less than in the previous year, which gives a crude birth rate of 13.2 per 1,000 population. In order to compare local with national birth and death rates an adjustment must be made to the former to allow for differences in age and sex distribution. Lancaster's adjusted birth rate of 13.6 may be compared with the crude rate for England and Wales (15.7) and with the adjusted rate for the Administrative County (15.69). Further details and comparisons are given in Tables 3 and 4.

Of the total births 37, or 5.6%, were illegitimate.

Deaths

Deaths from all causes numbered 750, 13 less than in the previous year, corresponding to a crude death rate of 15.1 per 1,000 population. After adjustment with the area comparability factor of 0.79 the rate was 12.0 per 1,000 which may be compared with the crude rate for England and Wales of 11.7 per 1,000. The adjusted death rate for the Administrative County in 1956 was 13.7 per 1,000 population, mortality in the North Western region being consistently higher than in more favourable regions in the South, and therefore exceeding the national figure.

Table I shows the deaths classified by cause and sex under the 36 main headings used by the Registrar-General, but the relative importance of the principal causes may be more clearly seen from the table below:

Principal Causes of Death.	1955		1956	
	No. of Deaths	Percent. of Total	No. of Deaths	Percent. of Total
Heart and Circulatory Diseases	319	41.8	290	38.7
Vascular Lesions of the Nervous System	105	13.7	117	15.3
Cancer (including Leukaemia)	102	13.4	124	16.5
Respiratory Diseases (excluding Tuberculosis)	87	11.4	82	11.1
Violence (including motor vehicle accidents)	21	2.8	26	3.5
Diseases of the Digestive System	13	1.7	10	1.4
Diseases of the Kidney and Prostate	10	1.3	12	1.6
Tuberculosis (all forms)	21	2.8	6	0.8
Infective Diseases (excluding Tuberculosis)	6	0.8	3	0.4
All other causes	79	10.3	80	10.7
TOTAL	763	100.0	750	100.0

Heart Disease

Diseases of the heart and circulatory system again appeared as the most common cause of death and in this group coronary thrombosis continues to be the chief culprit. Adequate scientific evidence concerning the exact causation of this disease is still lacking, but relative over-consumption of food (especially animal fat), associated with reduced physical activity in early and middle adult life, and excessive smoking, appear from the reports of several investigators to be the most significant factors. Moderation in living habits may yet prove to be the key to the prevention or control of coronary disease.

Lung Cancer

The death rate from lung cancer has greatly increased in Great Britain and other countries during the last 25 years. In Lancaster 8 males and 2 females died from this cause in 1950, and 13 males and 3 females in 1956, but the smallness of the figures makes it difficult to draw any valid conclusions.

The Ministry of Health has recently drawn attention to the special report of the Medical Research Council on Tobacco Smoking and Lung Cancer. The conclusion of that body was that the most reasonable interpretation of the very great increase in deaths from lung cancer in males during the past 25 years is that a major part of it is caused by smoking tobacco, particularly heavy cigarette smoking. The evidence to date suggests that 1 in 8 of lifelong heavy smokers die of lung cancer, against 1 in 300 of non-smokers. Knowledge of the cause of lung cancer is still incomplete and other factors such as atmospheric pollution may also play a contributory part. Intensive research is continuing. Meanwhile it is imperative to impress upon the young the dangers of cigarette smoking and to dissuade them from acquiring a habit which is harmful to health.

Maternal Mortality

Under the heading of childbirth, pregnancy and abortion, one death was recorded in 1956. Owing to the smallness of the absolute figures it is difficult to compare the resultant maternal death rate (1.51 per 1,000 total births) with the corresponding maternal death rates for other areas, as shown in Tables 4 and 5. Nevertheless, for the decennial period 1946-1955 the maternal mortality rates for Lancaster M.B., the Administrative County and England and Wales were 1.46, 1.07 and 0.91 respectively. The national rate for 1956 reached a new low record of 0.56 per 1,000 total births.

At the instigation of the Ministry of Health, in May, 1956, discussions were held at hospital group level between professional representatives of the hospital and specialist services, the local health authority services and the general practitioners to discuss toxaemia of pregnancy in relation to maternal mortality in their areas. Locally a Standing Obstetric

Advisory Committee, of which your Medical Officer of Health is a member, was subsequently set up to keep this matter under review, particularly in regard to the standard of ante-natal care.

Infant Mortality

The number of deaths of infants under one year of age was 18, equivalent to an infant mortality rate for 1956 of 27 per 1,000 live births, which is the lowest figure ever recorded in the City and exactly equal to the Administrative County rate. The trend of infant mortality from 1946 up to the year under report is illustrated in Table 6. Comparisons with other areas may be seen in Tables 4 and 6.

Of the 18 infant deaths assigned to the City no less than 9 were classified by the Registrar-General under " other defined or ill-defined diseases " and 2 as " congenital malformations." In the table below these group classifications have been broken down as far as local records allow and are shown under various age groups from one day up to one year.

Cause	under 1 day	1—7 days	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks	1—3 months	3—6 months	6—9 months	9—12 months	Total
Pneumonia (including pneumonia of the newborn)	—	—	—	—	—	—	2	1	1	1	5
Bronchitis	—	—	—	—	—	—	—	—	—	—	—
Gastro-enteritis	—	—	—	—	—	—	—	—	—	—	—
Congenital malformations											
circulatory system	—	1	—	—	—	1	—	—	—	1	2
genito-urinary organs	—	—	—	—	—	—	—	—	—	—	—
Other defined and ill-defined diseases											
prematurity (unqualified)	1	5	—	—	—	6	—	—	—	—	6
Post-natal asphyxia	—	—	—	—	—	—	—	—	—	—	—
Haemolytic disease of newborn	1	—	—	—	—	1	—	—	—	—	1
Intracranial injury at birth	—	—	1	—	—	1	—	—	—	—	1
other diseases of muscular system	—	—	—	—	—	—	1	—	—	—	1
All other causes											
Accidental asphyxia (inhalation of food)	—	—	—	—	—	—	—	—	1	—	1
Insufficient evidence	1	—	—	—	—	1	—	—	—	—	1
	3	6	1	—	—	10	3	1	2	2	18

Table 5

MATERNAL MORTALITY, 1946-1956

Comparative Statement of Maternal Death Rates for Lancaster M.B., the Administrative County of Lancaster and England and Wales.

Year	Lancaster M.B.		Lancs. Admin. County		England & Wales
	No. of Maternal Deaths	Mortality per 1,000 total births	No. of Maternal Deaths	Mortality per 1,000 total births	Mortality per 1,000 total births
1956	1	1.51	19	0.58	0.56
1955	1	1.38	40	1.31	0.64
1954	Nil	Nil	27	0.90	0.69
1953	3	3.92	39	1.26	0.75
1952	1	1.33	24	0.80	0.72
1951	1	1.34	21	0.69	0.81
1950	1	1.28	31	0.98	0.87
1949	1	1.07	32	0.97	0.98
1948	2	2.27	38	1.07	1.02
1947	1	0.94	56	1.35	1.17
1946	1	1.07	52	1.42	1.43
Average Mortality 10 years, 1946-1955		1.46	—	1.07	0.91

Table 6

INFANT MORTALITY, 1946-1956

Comparative Statement of Infant Death Rates for Lancaster M.B., the Administrative County of Lancaster and England and Wales.

Year	Lancaster M.B.		Lancs. Ad. County	England & Wales
	No. of Infant Deaths	Mortality per 1,000 live births	Mortality per 1,000 live births	Mortality per 1,00 rel. live births
1956	18	27	27	24
1955	23	32	27	25
1954	28	44	29	25
1953	24	32	29	27
1952	32	43	30	28
1951	28	38	29	30
1950	38	49	33	30
1949	32	39	38	32
1948	24	28	40	34
1947	43	41	47	41
1946	27	40	46	43
Average Mortality 10 years, 1946-1955		38.6	34.8	31.5

Neo-Natal Mortality

There were 10 neo-natal deaths (under 4 weeks of age), 3 less than in the previous year. Although the resultant neo-natal mortality rate of 15 per 1,000 live births is based on a small absolute figure (10), it is worthy of mention that both figures constitute a new low record for Lancaster (Table 3). The comparable rate for England and Wales was 16.9.

In contrast to the 8 deaths of older infants for which respiratory infections were responsible in 5 cases, the 10 deaths at ages under 4 weeks were mainly due to prematurity and other diseases peculiar to early infancy. Nine out of the 10 neo-natal deaths occurred within a week of birth. Much still remains to be elucidated concerning the causes of neo-natal deaths and the associated problems of prematurity and stillbirths.

Morbidity—Weekly Rate of New Claims to Sickness Benefit

I am indebted to the Manager of the local office of the Ministry of Pensions and National Insurance for the information supplied below. Since 1953 he has supplied a weekly return of the figures of new claims to sickness benefits made by the working population in the Lancaster area. These records cover Lunesdale and part of Lancaster Rural Districts, as well as Lancaster itself. In 1956 the peak period occurred late in February, when 280 first certificates of sickness were submitted in one week. The graph overleaf shows that the trend of morbidity has followed a roughly similar pattern in each of the three years, 1954, 1955 and 1956, apart from the peak periods of sickness which are largely due to respiratory infections.

It should be noted that the weekly figures do not relate to the total amount of sickness in the working population, but merely indicate the incidence of new cases of sickness.

No. of New Claims per Week — Working Population, 1956

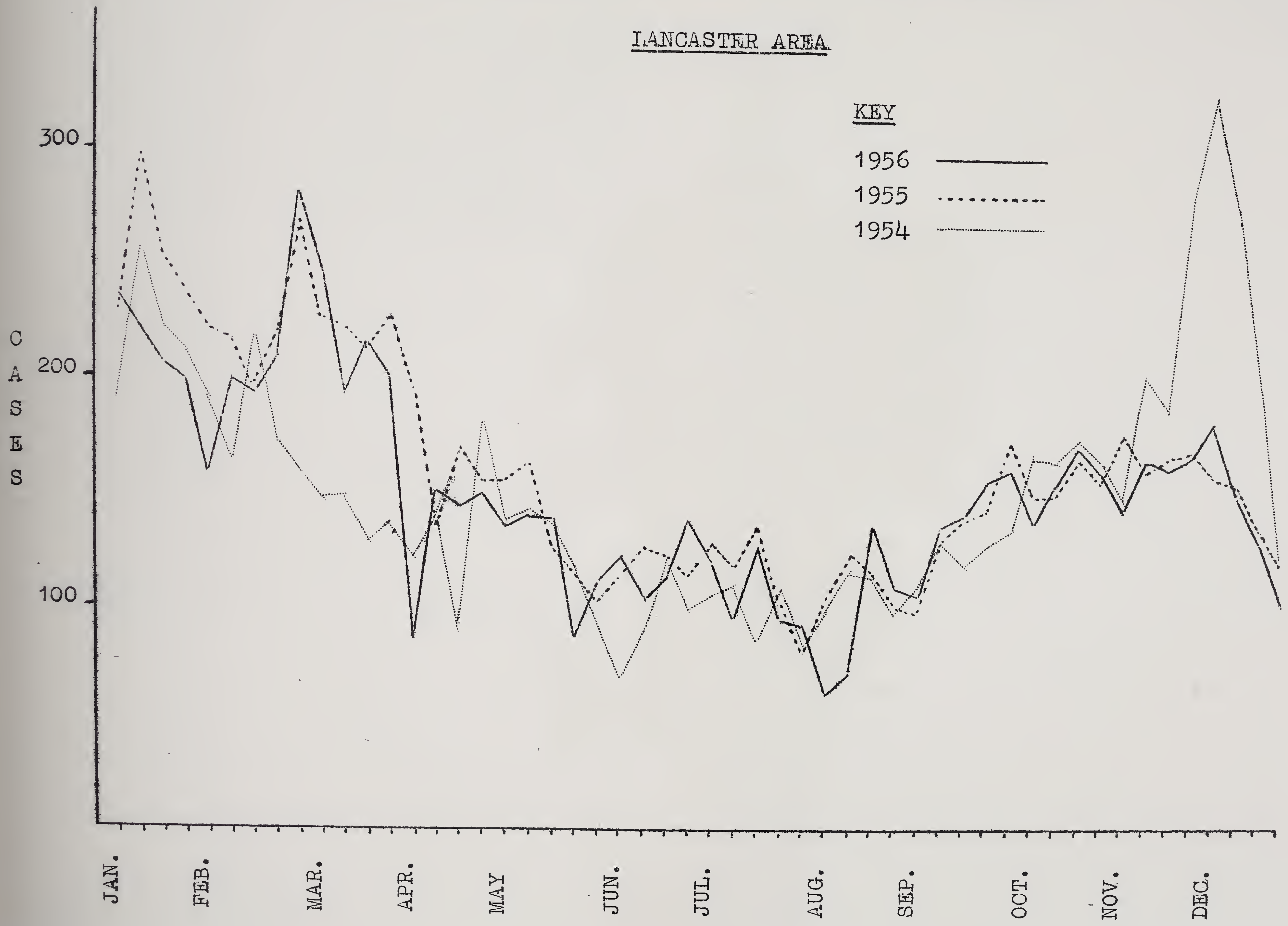
Jan.	3	237	Apr.	3	85	July	3	119	Oct.	2	159
,,	10	200	,,	10	150	,,	10	93	,,	9	134
,,	17	205	,,	17	143	,,	17	127	,,	16	152
,,	24	198	,,	24	149	,,	24	94	,,	23	169
,,	31	158	May	1	135	,,	31	90	,,	30	158
Feb.	7	199	,,	8	139	Aug.	7	60	Nov.	6	141
,,	14	192	,,	15	138	,,	14	70	,,	13	163
,,	21	209	,,	22	86	,,	21	135	,,	20	159
,,	28	280	,,	29	110	,,	28	108	,,	27	164
Mar.	6	246	June	5	122	Sept.	4	103	Dec.	4	179
,,	13	191	,,	12	103	,,	11	134	,,	11	149
,,	20	213	,,	19	113	,,	18	139	,,	18	128
,,	27	199	,,	26	138	,,	25	153	,,	25	101

Average No. of New Claims Per Week

1953 ...	140
1954 ...	150
1955 ...	160
1956 ...	148

WEEKLY INCIDENCE OF SICKNESS - WORKING POPULATION.

LANCASTER AREA



SECTION " B "

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

The main work of the Public Health Department concerns the control of infectious diseases and environmental health and detailed reports on these services, which are directly controlled by the City Council, will be found in Section " C " and Section " D."

The present section is related to those health services which concern mainly the personal health and welfare of the individual rather than public health and the community. Although administered by statutory authorities other than the City Council, it is felt that some brief account of the nature and scope of these services will be of interest to the Health Committee and, indeed, to the general public.

Local Health Services under Part III of the National Health Service Act, 1946

Divisional Health Committee No. 2 of the Lancashire County Council are responsible for the day-to-day administration of the following health services, which are available to the citizens of Lancaster as well as to the inhabitants of the surrounding districts.

1. *Care of Expectant and Nursing Mothers and Young Children* including the provision of ante-natal clinics, post-natal care, dental care, child welfare centres and day nurseries, as well as special arrangements for premature babies, unmarried mothers, convalescent care, etc.

2. *Domiciliary Midwifery.*

3. *Health Visiting.*

4. *Home Nursing.*

5. *Home Help Service,* including night and evening attendance.

6. *Immunisation and Vaccination,* existing schemes afford protection to children against diphtheria, whooping cough and tetanus. More recently vaccination against poliomyelitis and tuberculosis has been made available to children in certain age groups.

7. *Ambulance Service.*

8. *Mental Health Service.* This includes supervision and after-care for persons suffering from mental deficiency who do not require care or treatment in hospital. An Occupation Centre is available in Lancaster. Duly authorised officers also have certain responsibilities in connection with mental illness.

9. *Prevention of Illness, and Care and After-Care of Persons Suffering from Illness,* including health education, convalescent care, prevention and after-care of tuberculosis, provision of nursing equipment and apparatus, and after-care of persons discharged from hospital.

Welfare Services—National Assistance Act, 1948

The following welfare services are also administered by the Divisional Health Committee:—

1. *Residential Accommodation.* For persons in need of care and attention not otherwise available to them, accommodation is provided in the following hostels—Bay View, Laurels and Fair Elms, Lancaster; the Empress Hostel at Morecambe; Moor Platt and The Hermitage at Caton.

2. *Temporary Accommodation.* In case of urgent need, e.g., eviction, temporary shelter is provided at Bay View, Lancaster, separate accommodation being provided for children.

3. *Handicapped Persons.* Registers are maintained for the blind, the partially sighted and the deaf for whom certain welfare services are made available through the agency of voluntary organisations. Other classes of handicapped persons, including cripples, epileptics and spastics, may after registration, be provided with occupational therapy, transport to social centres, holidays, etc.

4. *Homes for Disabled and/or Old Persons.* There are 7 homes of this nature in the division, all managed by voluntary organisations. These are registered and inspected regularly by the divisional medical staff.

School Health Service—Education Act, 1944

The school health service is controlled centrally by a committee of the County Council, and for the local administration of this service, the Divisional Medical Officer is responsible to the County Medical Officer of Health.

In addition to the routine medical and dental inspections of children carried out in the City schools, various clinics, some attended by visiting specialists, are provided for the correction or treatment of certain defects.

The admission of handicapped pupils to special schools is arranged through the County Medical Officer of Health. Medical supervision of children under the care of the Children's Department is also undertaken by the school medical officers. Details relating to local clinics are set out in the table below:—

CLINIC AND TREATMENT CENTRES—LANCASTER CITY

	MON.	TUES.	WED.	THURS.	FRI.	SAT.
I ANTE-NATAL						
(1) Thurnham Hse....	—	—	—	—	2-4 p.m. (f'tn'tly)	—
(2) Ryelands Hse	—	—	—	9.30-11.30 (f'tn'tly)	—	—
II CHILD WELFARE						
(1) Thurnham Hse....	—	—	2-4 p.m.	2-4 p.m.	—	—
(2) Ryelands Hse ...	2-4 p.m.	—	—	2-4 p.m.	—	—
(3) Cong. Church Hala Est.	2-4† p.m.	—	—	—	—	—
III IMMUNISATION AND VACCINATION						
(1) Thurnham Hse.... (2) Ryelands Hse	Arranged as required, usually fortnightly					
IV MINOR AILMENTS	a.m.		a.m.		a.m.	
(1) Thurnham Hse....	9-10.30	—	9-10.30	—	9-10.30	—
(2) Ryelands Hse	9-10.30	—	9-10.30	—	9-10.30	—
V INSPECTION CLINIC Thurnham House	—	—	—	—	—	9.30-11.30 a.m. except first Sat'rday of month
VI OPHTHALMIC Thurnham House ...	—	—	—	—	—	First and third Saturdays of month
VII ORTHOPAEDIC Thurnham House ...	—	By ap-p'tm't	—	By ap-p'tm't	—	—
VIII SPEECH THERAPY Ryelands House ...	—	1.30 - 4.30 p.m.	9.30 a.m. to 4.30 p.m.	—	—	—
IX DENTAL Thurnham House ...	Monday to Friday, 9.30 a.m. - 4.00 p.m. daily by arrangement					

† Health Visitor only.

Laboratory Facilities

The bacteriological examination of milk, water, and ice cream is carried out by Dr. Rickards and his staff in the Department of Pathology at the Royal Lancaster Infirmary. Specimens of faeces, nose and throat swabs, blood, etc., from individual patients, and samples of suspect food are also sent to this laboratory for examination, and I am indebted to Dr. Rickards for numerous laboratory reports and much helpful advice in connection with epidemiological investigations. The chemical analysis of water, as well as of milk and foodstuffs taken under the Food and Drugs Act, 1938, is performed by the County Analyst, Dr. Walker, whose willing co-operation is also appreciated.

Maternity and Nursing Homes

The following maternity and nursing homes in Lancaster and district are registered with the County Council, under the provisions of the Public Health Act, 1936.

Westhaven Nursing Home, 2/3, Laurel Bank, Lancaster.

Beds: 10 medical.

Caton Green Nursing Home, Caton Green, nr. Lancaster.

Beds: 27 medical, 5 surgical.

Co-ordination of Health Services

The structure of the National Health Service, with responsibilities shared by separate authorities, renders it essential that there should be effective arrangements for securing integration. Locally this is ensured by cross representation on committees and by liaison between officers of the different services. Co-ordination of the school health service, the other health services of the County Council and the health services administered by the City Council, is facilitated by reason of the fact that your Medical Officer of Health acts also as Divisional Medical Officer and School Medical Officer. Co-operation with local general practitioners is secured by frequent exchange of information in relation to infectious diseases, housing, domiciliary nursing services, welfare of aged and other handicapped persons, etc. There is close liaison also with all local hospitals, and I am grateful to the administrative, medical, and nursing staffs for much useful information supplied in connection with the after-care of discharged patients. Every effort is made also to co-operate with the numerous voluntary organisations, which play such a useful part in filling the gaps still apparent in the National Health Service.

Section " C "

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

Prevalence

Judged by the total cases of infectious diseases notified by medical practitioners—397 this year compared with 601 in the previous year—1956 was a comparatively healthy year. Detailed figures relating to the various diseases including tuberculosis will be found on pages 30 to 31, but the following summary shows the comparative incidence of the principal infectious diseases over the past seven years.

	Average of 5 years 1950-1954	1955	1956
Scarlet Fever	85	18	24
Diphtheria	—	—	—
Whooping Cough	166	52	108
Measles	446	337	114
Pneumonia	48	18	34
Tuberculosis	56	52	37
Poliomyelitis	2	3	2
Typhoid and Paratyphoid Fever	3	1	—
Dysentery	72	99	64
Food Poisoning	40	13	8
Other Diseases	17	8	6
TOTAL	935	601	397

Measles

One hundred and fourteen cases of this common infection of childhood were notified, the lightest incidence since 1952.

Whooping Cough

In contrast to the decline in measles the incidence of whooping cough, at 108 cases, was doubled but was still considerably below the average of earlier years. Four cases were treated in hospital.

A combined vaccine conferring a substantial degree of immunity against both whooping cough and diphtheria is now widely used. More recently a triple vaccine giving protection against diphtheria, whooping cough and tetanus simultaneously has come into use, its main advantage being that children have to submit to fewer injections.

Diphtheria

The last case of diphtheria in Lancaster occurred in 1948, and memories of this once virulent and often fatal disease are fading. Many young parents do not realise the risks they run in failing to ensure that their children have been immunised against it. During 1955, twelve cases of diphtheria occurred in the Administrative County, but the disease is not likely to be eliminated completely until at least 75 per cent. of babies are immunised before their first birthdays. We are still some way off that objective.

The table below shows the number of Lancaster children immunised during the last three years. It will be seen that, compared with 1955, there has been a slight fall in the number protected in all age groups.

Immunisation is a free service, available either from the family doctor or through the school clinic or at child welfare centres, and furthermore, parents of young children now have a choice of a single, combined or triple vaccine.

LANCASTER CITY — IMMUNISATION CARRIED OUT

1954, 1955 and 1956

Number of individuals who completed a full course of primary immunisation during the period.										Number of individuals who were given a re-inforcement injection, i.e., subsequent to complete course.				
Age at final injection										Age Group.				
0-1	1-2	2-3	3-4	4-5	Total under 5 years	5-9	10-14	Total 5-14 years	Total 15 yrs. & over	0-4	5-9	10-14	Total under 15 yrs.	Total 15 yrs &over
YEAR 1954														
160	249	47	24	16	496	43	10	53	1	34	430	583	1047	73
YEAR 1955														
234	226	48	26	12	546	40	9	49	—	44	522	425	991	4
YEAR 1956														
209	162	28	16	6	428	28	4	32	1	29	524	414	967	2

Poliomyelitis

Two cases of poliomyelitis were notified against 3 in the previous year; both were of the non-paralytic type.

Towards the end of 1956 vaccination against poliomyelitis commenced for certain children born between the years 1947 and 1954, whose parents had given consent to this valuable prophylactic measure by registering their names with the local health authority. The poor response to this offer (approximately 30% of those eligible) was probably a reflection of the publicity given to the ill effects of a certain batch of Salk vaccine used at an earlier period in America. No ill effects have been reported from the British vaccine which is submitted to a most rigorous series of tests before each batch is released.

Dysentery

This particular bowel infection is difficult to differentiate clinically from other forms of diarrhoea and it is doubtful whether the cases notified to the Public Health Department do, in fact, represent its true incidence, especially as many cases occur in which the symptoms are slight. During the year 64 cases were notified, compared with 99 in 1955, and approximately half occurred in persons over the age of 65. Of the total cases 56 occurred in mental hospitals. The causal agent was identified as Sh. Sonnei in the majority, but Sh. Flexner appeared in a number of the institutional cases.

Food Poisoning

Food poisoning due to Salmonella organisms occurred in 8 cases, 5 fewer than in the previous year. In every instance the contacts were also examined and where necessary action was taken to prevent further spread by food handlers.

In all 8 cases the infection was caused by the same organism, S. typhi murium, the most common cause of food poisoning in this country. Three of the cases occurred in association in a mental hospital. The remainder were single cases occurring sporadically throughout the City, and it was not possible under these circumstances to identify any particular food as the vehicle of infection, nor to trace its origin.

CASES OF INFECTIOUS DISEASE (OTHER THAN TUBERCULOSIS) NOTIFIED DURING 1956

DISEASE.	AGE PERIOD - YEARS											Cases Admitted to Hospital.	Deaths
	0-1	1-3	3-5	5-10	10-15	15-25	25-45	45-65	65 &over	Age un-known	Total		
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	4	13	5	2	—	—	—	—	—	24	8	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles (excluding Rubella) ...	6	36	36	34	2	—	—	—	—	—	114	1	—
Whooping Cough	11	27	56	14	—	—	—	—	—	—	108	4	—
Acute Pneumonia (Primary and Influenzal)	—	1	—	3	1	3	6	14	5	1	34	2	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infection ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis—Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—
,, ,, Non-Paralytic	—	—	—	1	1	—	—	—	—	—	2	1	—
Acute Encephalitis—Infective ...	—	—	—	—	—	—	—	—	—	—	—	—	—
,, ,, Post Infective	—	—	—	1	—	—	—	—	—	—	1	1	—
Dysentery	—	2	1	1	3	1	11	14	31	—	64	—	—
Ophthalmia Neonatorum.. ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	1	—	—	—	3	—	1	5	—	—
Malaria (contracted in England and Wales)	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	1	—	—	1	—	—	2	2	2	—	8	2	1
Total	18	70	106	61	9	4	19	33	38	2	360	19	1

Tuberculosis

The number of cases of respiratory tuberculosis notified in 1956 was 35, 8 less than in the previous year. Over the preceding 10 years notified cases averaged practically 50 per annum, and in 1915 when records first started in the City the annual incidence was about 120.

Only 2 cases of non-respiratory tuberculosis were notified, the lowest number yet recorded. Non-pulmonary tuberculosis is now becoming a rare disease, simply because the bulk of the milk now consumed in Lancaster is either heat treated or comes from tubercle free herds.

For all forms of tuberculosis, notifications during the year amounted to 37, compared with an average of 58 for the period 1946-55.

Comparative figures are given below:—

Year	Cases Notified		
	Respiratory	Non-respiratory	Total
1956	35	2	37
1955	43	9	52
1954	33	8	41
1953	58	6	64
1952	48	6	54
1951	57	12	69
1950	46	9	55
1949	52	10	62
1948	66	11	77
1947	38	7	45
1946	52	9	61
Total	493	87	580
Over 10 yrs. 1946-55	49.3	8.7	58.0

The following table gives a summary of the known cases of tuberculosis in the City as at 31st December, 1956:—

	Males	*Females*	*Total*
Respiratory	159	106	265
Non-respiratory	14	20	34
	173	126	299

Mortality from Tuberculosis

The table below shows the number of deaths registered together with the death rates during 1956 and the preceding decennial period.

Year	Respiratory Tuberculosis		Non-respiratory Tuberculosis		All forms	
	Deaths	Rate per 1,000 pop'n.	Deaths	Rate per 1,000 pop'n.	Deaths	Rate per 1,000 pop'n.
1956	6	0.12	—	—	6	0.12
1955	20	0.40	1	0.02	21	0.42
1954	8	0.16	2	0.04	10	0.20
1953	7	0.14	2	0.04	9	0.18
1952	7	0.14	1	0.02	8	0.16
1951	19	0.37	1	0.02	20	0.39
1950	23	0.44	3	0.06	26	0.50
1949	14	0.27	1	0.02	15	0.29
1948	22	0.44	3	0.06	25	0.50
1947	27	0.53	2	0.04	29	0.57
1946	25	0.50	4	0.08	29	0.58
Average of 10 years 1946-55	17.2	0.34	2.0	0.04	19.2	0.38

The 6 deaths from respiratory tuberculosis in 1956 and the resultant death rate of 0.12 per 1,000 population create a new low record for Lancaster. This is the first year also in which no deaths were recorded from non-respiratory tuberculosis.

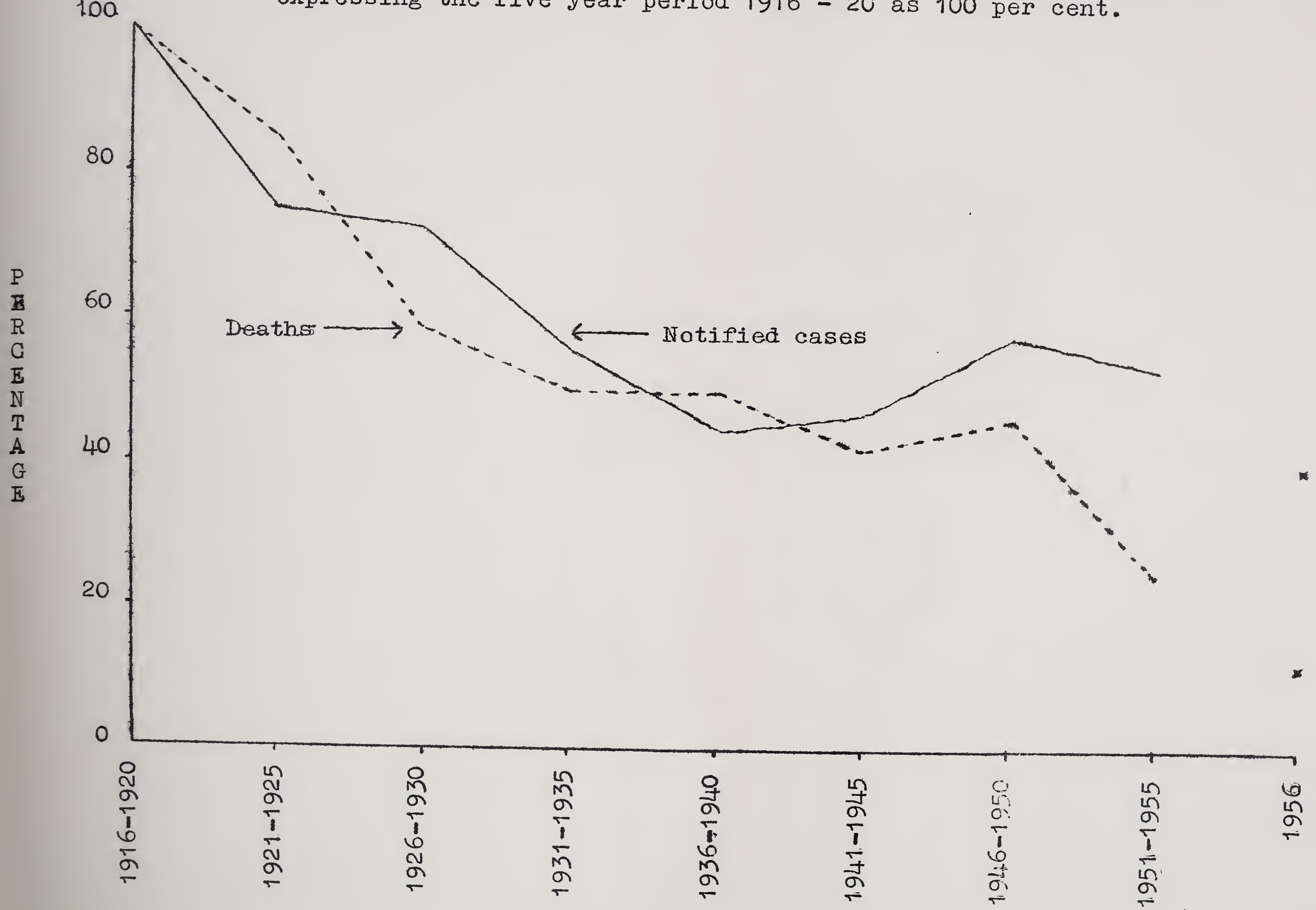
From Table 4 it will be seen that Lancaster's mortality rate from all forms of tuberculosis at 0.12 per 1,000 population was exactly equal to the rate for the Administrative County and also equal to the national rate.

Some experts have forecast that tuberculosis may be eradicated within the next two or three decades. Certainly the disease can, with the aid of modern drugs and methods of treatment, be regarded much more as a curable condition but, possibly largely because of this, the fall in the notification rate or incidence continues to lag behind the fall in the death rate. Despite the fact that increasing attention is now being given to the discovery of early cases by mass miniature radiography, tuberculin testing, etc., there are many people in the community, especially elderly people, whose disease has not been detected and who continue to spread the infection. In 1955 just over 20 per cent. of the total deaths from tuberculosis in the Administrative County escaped statutory notification as tuberculosis during life. Tuberculosis must therefore continue to be regarded as an important communicable disease, and the old established measures directed to its prevention and control must still be pursued as vigorously as newer measures such as vaccination and mass radiography.

During the year B.C.G. vaccination was performed on 62 young persons in Lancaster, exposed to risk from close contact with an infectious case, and at the end of the year a scheme of vaccination in school leavers was ready to begin.

RESPIRATORY TUBERCULOSIS

Graph to show the relative decline in cases notified and deaths, expressing the five year period 1916 - 20 as 100 per cent.



SANITARY CIRCUMSTANCES OF THE CITY

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

F. SHAW, D.P.A., M.R.S.H., A.M.I.P.H.E.

City of Lancaster—Environmental Health Services
Under the Direction of the Chief Public Health Inspector

HOUSING

Inspection of Houses
Preparation of reports on general housing conditions in the city.

Repair of Houses
Preparation of specifications and schedules of costs.
Supervision of works.
Execution of works in default of owners.

Clearance, etc. of Unfit Houses
Indication of areas needing re-planning and re-development.
Clearance of the buildings from such areas.
Demolition of single houses not included in areas.
Closure of dwellings which it is not practicable to demolish.

Valuation of Houses.
Valuation of houses to ascertain whether they are capable of repair at reasonable cost. etc.
Estimation of future life of houses.

Overcrowding
Ascertainment and abatement of overcrowding.
Common Lodging Houses
Inspection and Registration.
Houses Let in Lodgings
Inspection and Supervision.
Rehousing
Investigation into special housing needs which call for priority.
Removals in connection with re-housing.
Fumigation of household effects with HCN, when necessary.

RATS AND MICE

Destruction and infestation prevention.

INSECT, ETC., PESTS

Destruction and control.

UPHOLSTERY, ETC. FILLINGS

Supervision of premises where upholstery fillings are made or stored or used.
Sampling such fillings for examination as to cleanliness.

FOOD AND DRUGS

Examination and Sampling

Examination of:

Meat at time of slaughter.
Meat in butchers' shops, etc.
Food of all kinds in shops, stores, warehouses, etc.
Supervision of the disposal of food condemned as unfit.

Sampling of:
Food and Drugs for analysis.
Foods for bacteriological exam.

Hygiene of Food Premises, etc.

Inspection of all premises used for the preparation, storage, handling and sale of food.
Advice on layout, design and construction of food premises.
Advice on equipment.

MILK AND DAIRIES

Supervision of distribution of milk
Inspection of dairies.

Sampling of Milk for:

Adulteration. Keeping quality.
Tubercle bacilli. Brucella Abortus.

Pre-licensing Inspection of:
Pasteurising plants.
Sterilising plants.
Bottling establishments.
Routine inspection of plants and premises.

INSPECTION OF OTHER PREMISES, e.g.:

Factories.
Building and civil engineering sites
Workplaces Shops. Offices.
Places of Entertainment.
Offensive Trade premises.
Schools.

NATIONAL ASSISTANCE ACT

Burial of the Dead.
Arrangement for care of people living alone under insanitary conditions.

ATMOSPHERIC POLLUTION

Inspection of boiler, etc., plants
Observations of smoke from chimneys.
Investigations generally into atmospheric pollution.

GENERAL SANITATION

Investigation into complaints.
Abatement of nuisances.
Water supplies. (purity and sufficiency of).
Purity of swimming bath water.
Inspection of camping sites.
Drainage.
Removals of accumulations of waste, and offensive matter.

Rivers and Watercourses

Investigation into pollution.

Sewage Disposal

Sewage disposal from isolated buildings not connected to the town's sewerage system.

INFECTIOUS DISEASES

Investigations into causes of spread.
Disinfection of premises and articles.

FOOD-BORNE INFECTIONS

Investigations into causes.
Collection of specimens for exam.

PET ANIMALS

Inspection of pet animal shops.

PORT HEALTH

Inspection of crew's accommodation.
Ship drinking water supplies.
Rat and vermin destruction.
Enquiries re infectious diseases and sickness amongst crews.
Supervision of shellfish layings and collection grounds.

To The Chairman and Members of the
Public Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the pleasure to submit herewith my report for the year 1956.

Statistics relating to the various branches of the work of the Department, with observations and explanations where necessary or desirable, are given in the body of the report.

In this introduction, however, I would like to draw your special attention to the survey of food premises referred to on page 55, and to the general observations on housing conditions on page 45.

So far as food premises are concerned conditions in the Market Hall and in the Church Street open air market continue to give rise to concern both to your health officers and the food traders.

Obtaining the proper repair of several thousand houses in the City still remains a major problem. One of the difficulties, now dealt with by the Rent Act, 1957, has been the fixing of statutory rents at too low a level. As soon as the survey of food premises is completed, provided other circumstances permit, I hope to recommence the systematic inspection of houses in need of and capable of repair at reasonable cost.

Generally speaking, although all that we would have liked to have seen accomplished, e.g., increased slum clearance and a new market, has not been done, I think the report shows on the whole steady progress in the environmental health field.

In a year of shortage we were, very fortunately, able to maintain our staff of public health inspectors at full strength.

Finally, I would like to place on record my appreciation of the co-operation and support given by the staff of the Department.

I am,

Yours faithfully,

F. SHAW,

Chief Public Health Inspector.

WORK OF PUBLIC HEALTH INSPECTORS

Statistics Relating to Inspections, etc.

Public Health Inspections during 1956

No. of premises visited, 11,767. Defects or nuisances—No. discovered, 810; No. abated, 1,290. No. of notices served—Informal, 890; Stautory, 148; Legal proceedings, 4.

Types of Inspections and Visits other than Housing

Atmospheric pollution	281
Rodent or insect pest infestation	63
Infectious disease enquiries	19
Food inspection	164
Miscellaneous Public Health inspections	499
Miscellaneous visits	1,130
Offensive trade premises	9
Butchers' shops and stores	93
Bakehouses	114
Ice cream premises	139
Fish fryers' premises	38
Food preparing premises	112
Other food premises, general	80
Dairies	24
Public Houses	12
Markets	14
Restaurants	132
Shops (Shops Act)	72
Theatres, cinemas, etc.	37
Slaughterhouses	816
Snack bars, soda fountains, etc.	110
Pet shops	5
Combustion plants	79
Work places	41
Food vans and Milk vehicles	249
Schools Meals Service	35
Canteens	31

Complaints Received

Nature of Complaint	*Number*
Unsatisfactory housing conditions	78
Defective fireplaces	2
Defective rainwater pipes	13
Defective windows	11
Defective chimneys	7
Defective doors	8

Defective plasterwork	2
Defective eavesgutters	32
Defective roofs	32
Defective sinks	6
Defective ceilings	5
Defective walls	8
Defective waterclosets	19
Choked waterclosets	2
Burst water pipes	8
Dampness	62
Choked drains	87
Flooding	22
Defective dustbins	16
Accumulations of refuse	18
Dirty premises	4
Vermin	4
Rats	43
Mice	66
Insect pests	59
Foul and obnoxious odours	22
Dangerous buildings	1
Smoke nuisances	6
Overcrowding	48
Nuisances from animals	10
Miscellaneous	25
	726

Improvements and Repairs Effected Following Action by the Public Health Inspectors.

Improvements on Registered Premises

Factories	90
Dairies	4
Milk Vehicles	6
Miscellaneous	1

Food Premises

Walls and ceilings decorated	25
Washbasins provided	5
Hot water service provided	2
New equipment provided	9
Sinks provided	1
New floors laid	3
Improved ventilation provided	2
Extensions to food premises	2
Miscellaneous	10
Dustbins provided	1

Drainage, Sanitary Accommodation, etc.

Drains cleared from obstruction	73
Public sewers cleared from obstruction	26
Drains re-laid or repaired	20
Sewers re-laid or repaired	3
Soil pipes, waste pipes, etc., repaired or renewed	13

Water Closets

Additional W.C.s provided in houses	3
W.C. compartments re-built or repaired	80
W.C. basins renewed	50
W.C. cisterns renewed or repaired	7

Various

Offensive accumulations removed	13
Additional dustbins provided	1
Dustbins renewed	55
Smoke nuisances abated	1
Nuisances from animals abated	2
Miscellaneous	28

Execution of Work by City Council in Default of Persons upon whom Notices were Served

In 6 instances during the year the City Health Department was called upon to execute works in the default of persons upon whom statutory notices had been served. In all cases the City Council made orders for the collection of rents until such times as the costs will be recovered. The works carried out, with the costs, were as follows:—

Address	*Work*	*Cost* £	*s.*	*d.*
61, Bulk Road	Works necessary to make the house fit under the Housing Act	19	17	0
63, Bulk Road	—do.—	41	17	6
73, Bulk Road	—do.—	61	2	9
124, Coulston Road	Defective rainwater pipe	1	5	0
73, Bulk Road	Defective W.C. basin	5	10	0
First Floor Flat, 49, Regent Street	Provision of new dustbin	2	8	2

Shops (Shops Act, 1950, Section 38)

There are in the City about 900 shop premises of all descriptions. Many of them are one-man businesses. 72 of those where assistants are employed were inspected during the course of the year.

Camping Sites (other than Military)

Although no camping sites were licensed during the year the inspectors made 82 visits to sites which were either used for periods less than 42 consecutive days or were in use illegally. Most were in connection with unauthorised use of corporation land.

Measures taken to deal with Air Pollution

The measures taken during the year to deal with air pollution from combustion plants were:—

(a) The observation of factory chimneys;

(b) inspection of combustion plants for the purpose of ascertaining the causes of smoke nuisances and to give advice; and subsequent visits;

(c) the measurement of the degree of atmospheric pollution in the City.

(a) Observations

During the year your Public Health Inspectors made 27 observations of factory, etc., chimneys. The total time spent on these observations was 12 hours 51 minutes. Of this time the periods during which the various shades of smoke were emitted are shown in the following tables.

Length of time, in minutes, during observations
when smoke was emitted from chimneys

Black	Grey	Little or no smoke	Total
36.40	400.50	333.30	771

The number of smoke nuisances recorded and action taken were as follows :—

Nuisances Recorded	Verbal Warnings given	Written Notices sent
3	Nil	3

(b) Inspections and Visits

Eighty routine inspections of combustion plants were made during the year.

During the year your Chief Public Health Inspector was asked by the Management Committee of one of the local hospitals to report on the adequacy or otherwise of the existing boiler plant at the hospital. Efficiency tests were made and a report was submitted.

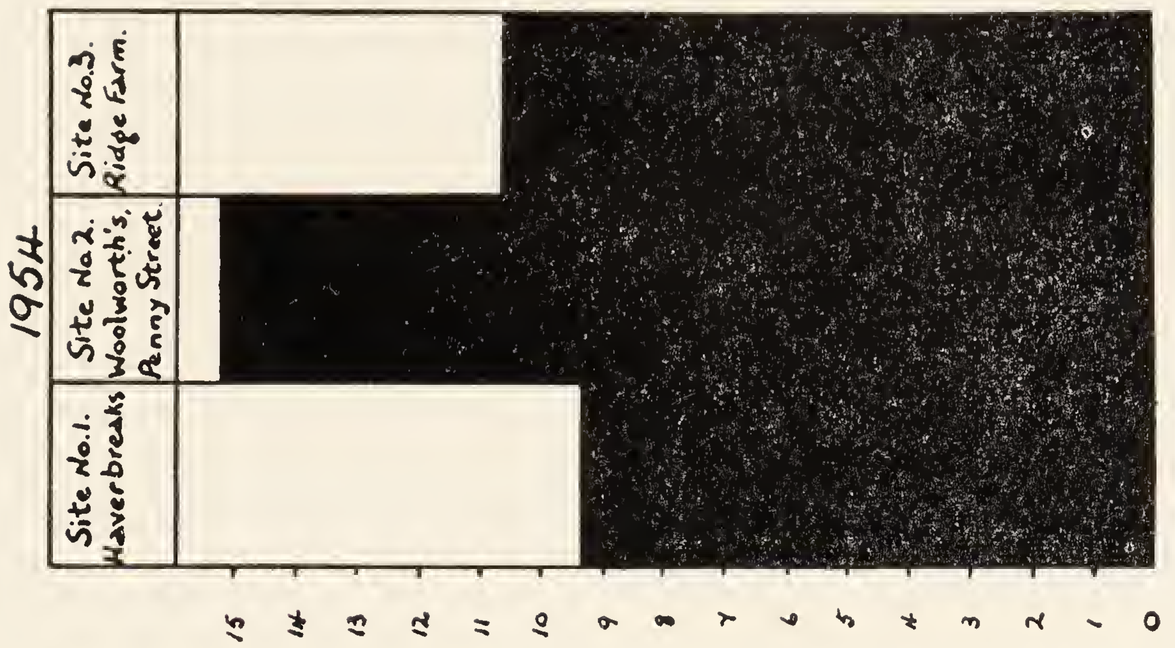
(c) Measurement of Air Pollution

During 1956 the comparative amount of ash, grit and other solid particles deposited in the City from smoke emitted from chimneys was measured as in the previous three years.

The total deposited matter during 1956, calculated in tons per square mile per month from the standard deposit gauges, and the amount of sulphur dioxide in parts per 100 million parts of air, as calculated from the volumetric instruments attached to the smoke filter are given in Table I below. Table II gives the average monthly deposit of soot during 1954-56.

TABLE I.

Month	TOTAL DEPOSITED MATTER (SOOT) Tons per square mile			SULPHUR DIOXIDE parts per 100 mil. parts of air Monthly Average Public Health Offices
	Site No. 1 Haverbreaks	Site No. 2 Penny Street Woolworths	Site No. 3 Ridge Farm	
January	9.02	16.78	10.53	7.8
February	4.73	8.35	4.39	6.3
March	10.45	11.28	13.67	2.4
April	5.57	9.83	7.20	5.2
May	6.45	13.67	8.70	4.2
June	6.03	11.72	13.70	3.5
July	11.99	12.57	13.90	2.9
August	15.08	17.93	16.08	3.5
September	8.78	10.47	15.73	5.6
October	6.86	11.21	9.52	9.1
November	6.92	14.05	7.71	—
December	9.53	15.20	16.08	—


1954
Site No.1. Haverbreaks
Site No.2. Woolworth's, Penny Street.
Site No.3. Ridge Farm.
15
14
13
12
11
10
9
8
7
6
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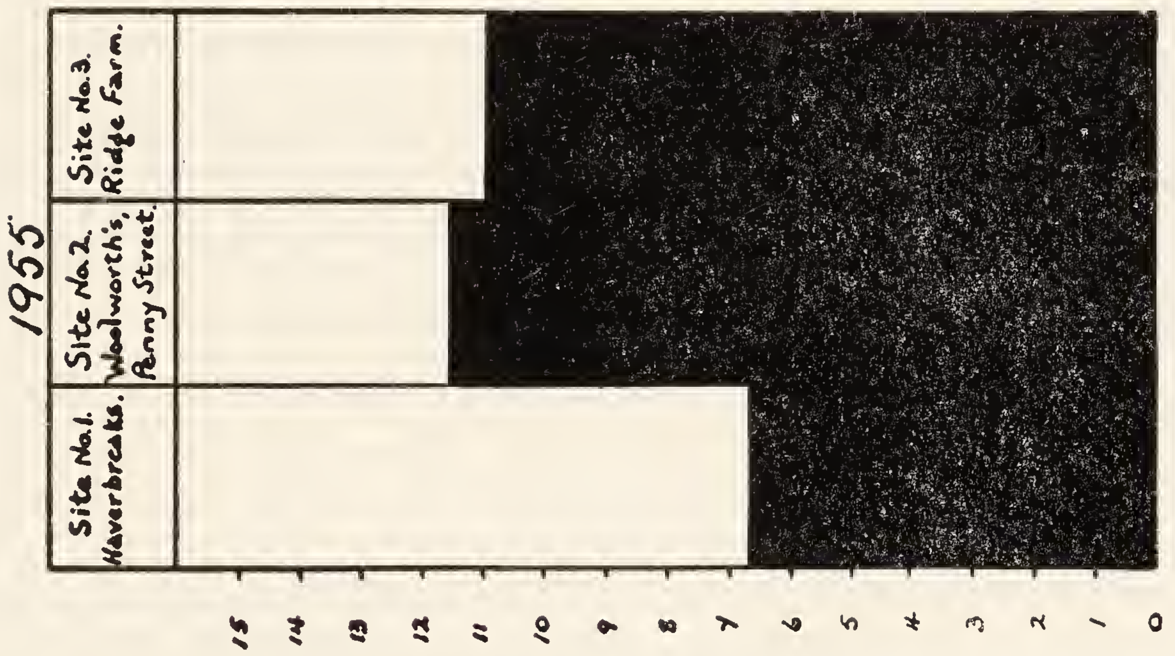
4
3
2
1
0


1955
Site No.1. Haverbreaks.
Site No.2. Woolworth's, Penny Street.
Site No.3. Ridge Farm.
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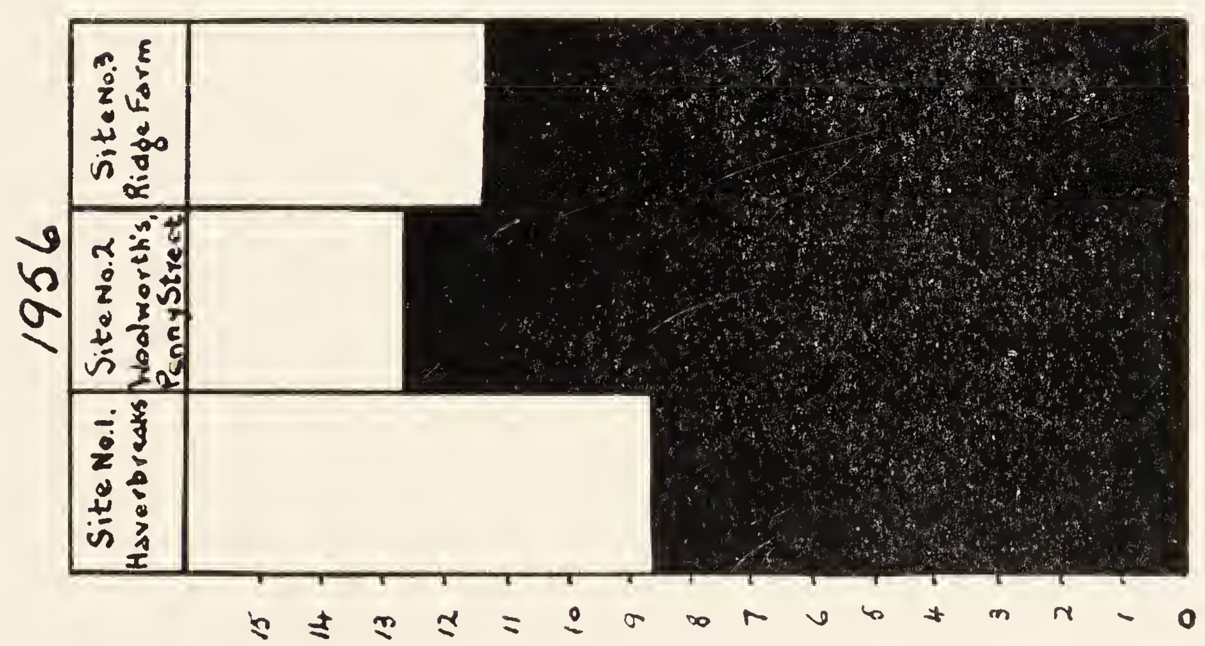
1956
Site No.1. Haverbreaks
Site No.2 Woolworth's, Penny Street
Site No.3 Ridge Farm
15
14
13
12
11
10
9
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7
6
5
4
3
2
1
0

Offensive Trades

Number of premises—4.

Types of offensive trades:—

Fellmongers	1
Gut Scrapers	2
Rag and Bone Dealer	1

All the offensive trades in the City were, generally speaking, carried on during the year without serious nuisance in spite of difficulties due to obsolete buildings.

Factories Act, 1937

Details of the number of inspections made by the Public Health Inspectors and of the number and type of contraventions found are given in the following tables:—

INSPECTIONS

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
Without mechanical power	36	2	—	—
With mechanical power	210	39	3	—
Other premises ...	1	—	—	—
Total	247	41	3	—

DEFECTS FOUND

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness (S.1)	2	—	—	—	—
Overcrowding (S.2) .	—	—	—	—	—
Unreasonable temperature (S.3) ...	1	—	—	—	—
Inadequate ventilation (S.4)	1	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7):—					
(a) Insufficient ..	1	1	—	1	—
(b) Unsuitable or defective ...	11	4	—	1	—
(c) Not separate for sexes ...	1	—	—	—	—
Other offences ...	1	—	—	—	—
Total ...	18	5	—	2	—

Common Lodging Houses

There are no common lodging houses in the City.

Houses Let in Lodgings

The term " houses-let-in-lodgings " is used to describe a house where some or all of the rooms are let off in separate lettings, and also to describe a house or dwelling used to accommodate a number of people not of the same family but living together as a single household. Transport houses, where long distance motor drivers are accommodated for the night, and houses where people are lodged and boarded on a weekly basis, are examples of the latter.

More households and families in Lancaster today enjoy a house to themselves than has probably been the case at any other time in our recorded history. Also the type of people who live in rooms has undergone a significant change in the last few years. About 50 years ago it was common for families to share a house. The people who today live in houses-let-in-lodgings in Lancaster are mainly immigrants, newly married couples, feckless families, old age pensioners, and single people who prefer to live alone instead of boarding with a family.

The immigrants are mainly people of European extraction who have come here to escape from intolerable conditions in their own countries. Most of the newly married couples manage to obtain a house or flat of their own within three years. It would seem, however, that the number of old people living alone in rooms is increasing.

At 31st December, 1956, out of approximately 1,300 applicants on Lancaster's housing list, 897 were living in rooms. The 897 consisted of 554 couples either with one or more children, 240 childless couples, 56 elderly and 10 other people living alone, and 37 elderly couples. These statistics do not, however, give a complete picture of the people who are at present living in rooms because there are probably other people, especially old age pensioners and single people living in rooms, who have not applied for a Council house.

The houses used for multiple occupation are usually the older type built for the professional and middle classes of 50 years ago They are too large for the ordinary sized family of today and lack modern conveniences. The majority of them are, however, structurally sound and capable of a further useful life of many years. They need, however, improving in order to properly serve their present function.

A complete picture of conditions in houses-let-in-lodgings can only be obtained from a full investigation. Unfortunately, the demands on the time of your Public Health Inspectors will not permit this at the present time.

Tents, Vans, Sheds, etc.

There are no tents, vans, or similar erections used at present for human habitation in the City.

Underground Sleeping Rooms

There are in the City 5 houses where the basements, the floors of which are 3 feet or more below ground level, are used as sleeping rooms. All these basements are unfit for human habitation and consequently, as our slum clearance programme proceeds, it will be necessary to make Closing Orders in respect of these basements, and thus prohibit their use as dwellings whilst they remain unfit.

Rag Flock and Other Filling Materials Act, 1951

Rag Flock Acts, 1911 and 1928

No. of premises in the district in which filling materials are manufactured, used, or sold	4
No. of inspections	4
No. of samples taken	2

Both samples satisfied the prescribed tests for cleanliness, etc.

HOUSING CONDITIONS

General Observations

The number of Corporation dwellings built during 1956 (43) was less than is required to keep pace with the City's average annual slum clearance programme. Lancaster's present slum clearance programme has to be completed by about the middle of 1963, and therefore during the next six years it will be necessary for the City Council to build at least an average of 67 dwellings per year.

Six years is a long time for a family to spend in a damp house, or in a house which is in a state of gross disrepair, and therefore the aim should be to complete the rehousing of the people from the unfit houses in as short a time as possible.

Slum clearance in most cases should be only a preliminary to redevelopment and the two should proceed side by side. In the next few years no small part of the Council's resources should be used to redevelop the squalid and decaying areas of this ancient and proud City. Redevelopment is a sound economic proposition because it replaces very low rated property with property of a greater annual value, and an apparently thriving city will attract fresh industries and trade, whereas unarrested decay leads to further decay.

The repair of several thousand houses in the City which are capable of 20 or more years further life if repaired in time, still remains a major public health problem. The provisions of the Rent Act, 1957, will remove one of the difficulties—that of uneconomic statutory rents.

Only 30 houses were improved with the help of financial grants during 1956. This is disappointing because it is less than in 1955 and there are about 4,000 structurally sound houses in the City which are lacking in modern amenities such as a bath and hot water service.

Fifteen families in the City were overcrowded at the end of 1956. This is 12 more than was the case at the end of 1955. After a 7 years effort to abolish overcrowding in the City, during which period 382 cases were abated, care in letting policy will be needed if past work is not to be undone.

HOUSING—STATISTICAL INFORMATION

Houses without Internal Piped Supply of Water, etc.

(a) Number of houses which have not an adequate internal water supply	11
(b) Number of houses which have no separate water closet or other adequate sanitary accommodation	67

Inspection of Dwelling Houses

1.	Total number of dwellings inspected	331
2.	Total number of inspections made	1,001
3.	Number of houses inspected found to be unfit but capable of repair at reasonable cost	279
4.	Number of houses inspected and found not to be unfit but requiring repairs enforceable under the Public Health Act	20
5.	Number of houses inpected which were found to be unfit but were not capable of being made fit at reasonable cost .	4
6.	Number of houses inspected which called for no further action	28
7.	Total number of unfit houses existing at end of 1956	454

Notices Served

8.	Formal notices under the Housing Acts requiring repairs to render houses fit for human habitation	60
9.	Formal notices requiring repairs, etc., under the Public Health Act	19
10.	Informal notices requiring repairs to houses	174
11.	Intimations to owners concerning lack of information in rent books	11

Result of Action

Repair of Houses

		After Informal Notice	*After Formal Notice*
12.	Houses made fit following the service of Housing Act notices	20	44
13.	Houses in which defects were remedied after the service of notices under the Public Health Act	5	7

Demolition and Closure of Dwellings

14.	Unfit houses demolished during the year	27
	Number of persons rehoused from these houses	101
15.	Houses closed during the year	Nil
	Number of persons rehoused from these houses	Nil
16.	Dwellings, which were parts of buildings, closed	1
	Number of persons rehoused from these dwellings	4

Repairs to Dwellings

Roofs repaired or stripped and renewed	53
External walls re-pointed	19
Rainwater pipes repaired or renewed	51

Eavesgutters repaired or renewed	93
Chimney stacks re-built	4
Yards, passages, pavements repaired or renewed	14
Ceilings re-plastered or repaired	23
Internal walls re-plastered or repaired	120
Windows repaired or renewed	161
Doors repaired or renewed	23
Floors repaired or renewed	28
Fireplaces repaired or renewed	17
Sinks renewed	12
Repairs to water supply systems	8
Miscellaneous	25

Houses Improved with the Help of Financial Grants

Total number of schemes submitted to the Council	44
Number of dwellings affected by the schemes	44
Number of schemes completed by the end of the year	30
Additional dwellings provided	2

New Dwellings Erected During the Year

	Houses	*Flats*
By the City Council	43	Nil
By private persons	52	Nil
Total	95	Nil

Overcrowding

Housing Act, 1936. Part IV

At 31st December, 1956, 15 families in the City were overcrowded. This is 12 more than there were at the end of 1955. It is difficult to account for this increase for the population of the City has fallen slightly. Statutory overcrowding due to natural increase ought to continue to receive top priority for rehousing.

During the year 19 cases of overcrowding were abated.

The ways in which the overcrowding was abated are shown in the table below.

Abatement of Overcrowding during 1956

1.	Cases rehoused by the City Council	7
2.	Cases abated following warnings given by the Health Department	12
3.	Cases abated following legal proceedings	—
4.	Cases abated either by voluntary action on the part of the families concerned or by changed circumstances, e.g., a death in the family or a member leaving home for reasons of work	—
	Total cases abated	19

Overcrowding Position during 1956

1.	Cases remaining at 31-12-55	3
2.	Number of new cases reported during 1956	28
3.	(a) Number of cases abated during 1956	19
	(b) Number of persons concerned in (a) above	77
4.	Number of cases of overcrowding in Council houses which were abated during the year	—
5.	(a) Number of dwellings which remained overcrowded at the end of 1956	12
	(b) Number of families dwelling in these houses	15
	(c) Number of persons dwelling in these houses	52

There were no cases during the year in which houses became again overcrowded after the Council had taken steps for the abatement of overcrowding.

SANITARY CONDITIONS IN SCHOOLS

Routine inspections of all the schools situated in the City were made by the Public Health Inspectors during the year.

Information concerning the present sanitary, drinking, and washing arrangements, etc., in the schools is given in Table I below, and the improvements made during 1956 is given in Table II.

TABLE I

Total number of schools in the City	38
Number with fresh water closets only	35
Number with trough closets	3
Number with unsatisfactory yard surfaces	4
Number with inadequate washing facilities	23
Number with inadequate drinking facilities	2

The arrangements for the serving and taking of meals are not satisfactory in a number of schools.

TABLE II

Friends School, Meeting House Lane	Playground re-surfaced.
Friends School, Fenton Street	2 additional W.H.B.s provided.
Ripley Boys' Secondary Modern	New washing and sanitary accommodation provided.
Dallas Road Secondary Modern	Re-decorated (part).
Cathedral Secondary Modern	10 new W.C.s provided.

PLACES OF ENTERTAINMENT

Thirty-seven inspections of places of public entertainment were made during the course of the year and a number of visits were made during performances in order to take thermometer readings and otherwise test the state of the air in the auditoriums. No conditions were recorded which would necessitate the City Council taking further action.

INSPECTION AND SUPERVISION OF FOOD

The administration of the Food and Drugs Act, 1955, the Food Hygiene Regulations, 1955, and Milk and Dairies Regulations.

Milk Supply : Supervision and Distribution

During the year Public Health Inspectors made a total of 24 inspections of the 8 dairies situated in the City. It was found necessary on 8 occasions to draw attention to contraventions of the Regulations or other unsatisfactory conditions.

Improvements in Dairies

In one large dairy two new bottle fillers and new conveyer belt were installed at a total cost of £7,384.

Average Daily Consumption of Milk

The average daily consumption of milk per head of the population increased slightly from 0.60 pints to 0.63 pints.

The proportion of pasteurised milk consumed in the City fell from 73.53% in 1955 to 67.68% in 1956. The amount of sterilised milk increased from 3.22% in 1955 to 8.77% in 1956. The consumption of heat treated milk (i.e., pasteurised and sterilised) fell by .30% during 1956.

Description	*Daily Consumption in Gallons*	*Per centum of Whole*
Non-descript Raw Milk	85	2.17%
Tuberculin Tested Milk	838	21.38%
Pasteurised Milk	1,737	44.31%
T.T. (Pasteurised) Milk	916	23.37%
Sterilised Milk	344	8.77%
TOTAL	3,920	100.00%

Average daily consumption in pints per head of population ... 0.63 pints

Quantity of Milk Bottled (in gallons)

	Amount bottled outside the City (in galls. per day)	*Amount bottled in the City (in galls. per day)*
Non-descript Raw Milk	85	—
Tuberculin Tested Milk	620	218
Pasteurised Milk	1,115	622
T.T. (Pasteurised) Milk	323	593
Sterilised Milk	344	—
	2,487	1,433

Milk (Special Designation) (Raw Milk) Regulations, 1949
Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949

Information concerning the number of licences issued under the above-mentioned Regulations during 1956 is given below:—

Tuberculin Tested Milk: Bottling, 1. Dealers other than bottlers, 86.

Pasteurised Milk: Pasteurising Plant, 1. Dealers, 75.

Sterilised Milk: Dealers, 73.

Sampling of Milk for Bacteriological and Biological, etc., Tests

TESTS FOR TUBERCULOUS MILK

Information concerning the number of samples and grades of milk submitted for biological tests for the presence of tubercle bacilli and the results of the tests is given in the following table.

TESTS FOR TUBERCULOSIS MILK

	Nondescript Raw Milk	Tuberculin Tested Milk
Total Number Taken	10	70
Number Negative	8	58
Number Positive	—	—
No Result	2	12
Percentage Positive	—	—

Sampling of Milk for Good Keeping Quality and for Evidence of Adequate Pasteurisation or Sterilisation

Information concerning the testing of milk for good keeping quality and for adequate heat treatment is given in the following tables.

SAMPLES OF MILK TAKEN FOR METHYLENE BLUE AND B.COLI TESTS

	Raw Milk Nondescript	Tested Milk. Tuberculin	Pasteurised Milk.	Tuberculin Tested (Pasteurised)
Total Number Taken	10	70	70	15
Number Satisfactory	6	59	70	15
Number Unsatisfactory	4	11	—	—
Percent. Unsatisfactory	40.00%	15.70%	—	—

SAMPLES OF MILK TAKEN FOR PHOSPHATASE TEST

	Pasteurised Milk.	Tuberculin Tested (Pasteurised) Milk.
Total Number Taken	70	15
Number Satisfactory	69	15
Number Unsatisfactory	—	—
Percentage Unsatisfactory	—	—
No result	1	—

SAMPLES OF MILK TAKEN FOR BRUCELLA ABORTUS TESTS

	Nondescript Raw Milk	Tuberculin Tested Milk
Total Number Taken	10	70
Number Satisfactory	8	63
No. Positive Whey Agglutination Test	2	—
Percent. Pos. Whey Agglutination Test	20.00%	—
No Test done	—	7

The two samples found to be positive for Brucellae by the whey agglutination test were from milk produced in the Lancaster Rural District.

Upon notification of the result of these tests, the Rural Council Health Officers took the necessary steps to deal with the matter. The action taken was as follows:—

(1) Arrangements were made for the immediate pasteurisation of all milk produced at the farm, notice being served under Article 20 of the Milk and Dairies Regulations, 1949.

(2) With the co-operation of the County Veterinary Officers, samples were taken from individual animals for whey agglutination and animal inoculation. Of 25 cows, 10 were proved positive by the latter test.

(3) The producer agreed to the eventual disposal of these 10 animals, after drying off and fattening for a short period, as beef cattle for slaughter.

SAMPLES OF STERILISED MILK TAKEN FOR TURBIDITY TEST

Number taken: 13. Results all satisfactory.

Observations on Results of Tests

The percentage of samples of nondescript raw milk which failed to pass the good keeping quality test (methylene blue) increased from 25% in 1955 to 40% in 1956. The proportion of T.T. samples which failed to pass the test fell from 25% in 1955 to 15% in 1956.

It is pleasing to be able to report, however, that all but one of the samples of pasteurised milk submitted for the phosphatase test were found to be satisfactory.

Bacteriological and Chemical Examination of Ice-Cream

Bacteriological Examination

Out of 36 samples of ice cream taken for bacteriological examination 31 were placed in Grade 1 and 5 in Grade 2 indicating they were all satisfactory. None of the samples was found to contain B.Coli.

Bacteriological Examination

No. of Samples Taken	Methylene Blue Decolourisation Test		B. Coli		Ministry of Health Provisional Grades			
	Satisfactory	Unsatisfactory	Absent Satisfactory	Present Unsatisfactory	1	2	3	4
36	36	—	36	—	31	5	—	—

Chemical Examination

No sample of ice cream sent for analysis contained less than the legal minimum of 5% fat. The majority of samples contained between 7.5% and 11%.

Table Showing Fat Content

No. of Samples Taken	Under 5·0%	5·0% - 7·5%	7·5% - 10·0%	Over 10·0%
10	—	4	1	5

Bacteriological Examination of Foodstuffs in General

The following table gives information concerning foods taken in routine sampling to ascertain whether the food had been prepared, handled, and stored under hygienic conditions. It will be seen that, although a fairly wide variety of foods were sampled, none was found to be unsatisfactory.

Sample	*Number Taken*	*Satis-factory*	*Not Satisfactory*
Brawn	3	3	—
Savoury Duck	1	1	—
Cottage Pie	1	1	—
Minced Beef	1	1	—
Cream Puff	2	2	—
Cream Sandwich	1	1	—
Cream Sponge	1	1	—
Cream Cake	4	4	—
Pork Pie	1	1	—
Dried Milk Powder	1	1	—
Roast Lamb and Gravy	1	1	—
Apple Tart and Custard	1	1	—
Ice Cream	1	1	—
Meat Pie	3	3	—
Corned Beef with Cereal	1	1	—
Fish Cake	1	1	—

Pork Luncheon Meat	3	3	—
Custard Pie	2	2	—
Salmon Paste	1	1	—
Potted Beef	1	1	—
Potted Meat	1	1	—
Potted Beef Paste	1	1	—
Roast Pork	2	2	—
Ox Tongue	1	1	—
Ham and Pork	1	1	—
Pork Loin	1	1	—
Corned Beef	1	1	—
Vanilla Slice	1	1	—
Chopped Pork	1	1	—
Boiled Ham	1	1	—
Ham Sausage	1	1	—
"Cracow" Salami Sausage	1	1	—
Polish "Cracow" Sausage	1	1	—
Yugoslav "Cracow" Sausage	1	1	—
Ulster Fry	1	1	—
	47	47	—

Meat and Other Foods

The following are particulars of meat inspection carried out by your Public Health Inspectors during the year at the abattoir.

NUMBER OF ANIMALS SLAUGHTERED AND INSPECTED AT ABATTOIR

	Cattle excl'ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	2,935	204	232	11,329	7,993
Number Inspected	2,935	204	232	11,329	7,993
All Diseases Except Tuberculosis and Cysticerci:					
Whole carcases condemned	2	7	14	20	25
Carcases of which some part or organ was condemned	1,777	104	—	42	400
Percentage of the number inspected affected with disease other than tuberculosis & cysti.	60.61%	54.41%	6.03%	.55%	5.32%
Tuberculosis only:					
Whole carcases condemned	5	2	—	—	11
Carcases of which some part or organ was condemned	95	29	—	—	65
Percentage of number inspected affected with tuberculosis	3.41%	5.20%	—	—	.95%
Cystercercosis:					
Carcases of which some part or organ was condemned	14	—	—	—	—
Carcases submitted to treatment by refrigeration	14	—	—	—	—
Generalised & totally condemned	—	—	—	—	—

Total Units Killed and Inspected

	Cattle	*Calves*	*Sheep*	*Pigs*	*Total*
1955	24,290	855	19,946	27,996	73,087
1956	31,390	696	22,658	23,979	78,723

For conversion from animals killed and inspected to inspection units the following equivalents are used:—

One cattle beast	10 units
One calf	3 units
One sheep	2 units
One pig	3 units

AMOUNT OF MEAT CONDEMNED BY WEIGHT

(*a*) *For tuberculosis*:	*Tons*	*Cwts.*	*Qrs.*	*Lbs.*
Cattle	1	17	3	22
Calves	—	—	—	—
Sheep	—	—	—	—
Pigs		2	1	12
	2	0	1	6

(*b*) For other conditions:	*Tons*	*Cwts.*	*Qrs.*	*Lbs.*
Cattle	1	10	2	9
Calves		5	1	1
Sheep		8	2	3
Pigs	1	1	3	19
	3	6	1	4

Particulars of Other Foodstuffs Condemned during 1956

One hundred and sixty-four visits were made to food shops and stores for the purpose of examining food, and the following amounts of food were condemned as unfit for human consumption. In all cases the food was voluntarily surrendered and the question of legal proceedings did not arise.

Tinned Goods:	*Tins*	*Tons*	*Cwts.*	*Qrs.*	*Lbs.*
Tinned Meat	460	—	14	2	9
Tinned Milk	959	—	8	0	7
Tinned Fish	21	—	—	—	12
Tinned Fruit	585	—	8	3	7
Tinned Vegetables	283	—	3	2	3
Tinned, Miscellaneous.	144	—	1	2	5
	2,452	1	16	2	15

Other Condemned Foodstuffs:	*Tons*	*Cwts.*	*Qrs.*	*Lbs.*
Bacon	—	—	2	7
Beetroot	—	—	1	9½
Cheese	—	—	—	9
Coffee	—	—	—	¼
Crab	—	—	—	2
Crumpets	—	—	—	10
Fat, Cooking	—	—	—	½
Flour, Self Raising	—	—	—	15
Fondant	—	—	1	0
Fruit, Dried	—	11	0	3¼
Gelatine	—	—	—	25
Ham	—	—	1	8
Jelly Cream	—	—	—	5
Margarine	—	—	—	6
Meat, Cooked	—	—	1	5½
Meat, Fresh	—	—	—	14½
Powder, Custard	—	—	—	7¾
Preserves	—	—	—	26
Rice, Ground	—	—	—	1½
Sago	—	—	—	2
Sauce	—	—	—	¾
Semolina	—	—	—	½
Suet, Beef	—	—	—	1¼
Tapioca	—	—	—	1½
Tea	—	—	—	2¼

Ice Cream

241 Wrapped Blocks
72 Cartons
24 Gaiety Bricks
39 Iced Lollies
6 galls. Ice Cream Mix
30 Chocolate Mousse
30 Strawberry Mousse

60 Apple Pies
24 Fish Cakes

90 Danish Eggs
32 pkts. Sliced Chicken
16 pkts. Braised Beef
24 pkts. Potato Puffs
2 pkts. Table Jelly
10 cartons Strawberries in melba sauce
180 pkts. Gums
144 Chocolate Cream Eggs
42 Chocolate Wafer Snacks
2 Hens (11¾ lb.).

Food Premises

The Food and Drugs Act, 1955, and the Food Hygiene Regulations, 1955, both came into operation on the first day of 1956.

The first task in respect to these statutes was to examine the Regulations and draw up standards so that the Regulations would be uniformly interpreted throughout the City by all your inspectors. This was not a small task because the practical application of the Regulations to the various trades had to be carefully considered. The interpretation standards were approved by the City Council and, with the Regulations upon which they were based, were circulated to all food traders in the City during the month of July.

The second stage, which is still in progress is the inspection of all food premises in the City and, where necessary, the sending of notices to the traders indicating what is required in the way of alterations and provision of services, etc. to bring the premises up to the approved standards. Because of the pressure of other work, however, it was not practicable to commence this survey until early in October. The Regulations contain many new provisions with respect to the hygienic handling of food and the construction, lighting, ventilation and equipment of food premises, and in consequence, a thorough and detailed inspection of all food premises, whether a small corner shop or a large food factory, is necessary. By the end of 1956 your public health inspectors had, on these lines, surveyed 57 premises out of which 53 were found to fall short of the requirements of the Regulations. The deficiencies found in these premises are shown in the table below.

Deficiencies

Inadequate lighting	41
Inadequate ventilation	23
Insufficient sinks	20
None or insufficient washhand basins	46
Not displaying notices regarding washing of hands	40
Lack of proper facilities for supply of hot water	5
Lack of storage accommodation for outer clothing	10
Insufficient refuse receptacles	5
Lack of first aid equipment	16
Lack of proper protection of food from contamination	22
Various defects in structure	35
Defective sanitary accommodation	2
Lack of cleanliness	4

In the earlier part of the year, before the commencement of the special survey and whilst the standards were in course of preparation, all food premises in the City were kept under routine inspection for matters relating to cleanliness. The numbers of these routine inspections are shown in Table II below.

Routine Inspections of Food Premises

During the year the following number of inspections were made of the various food premises:

Bakehouses	114
Butchers' Shops	93
Meat Stores, Abattoir, etc.	816
Fish Fryers	38
Restaurant Kitchens, etc.	132
Ice Cream Premises	139
Market Stalls	14
Other food premises	421
Dairies	24
Snack Bars, etc.	110
Public Houses	12
Food preparing premises	112

Market Hall and Church Street Market

Without doubt one of the greatest hindrances to the improvement of standards of hygiene in food premises in Lancaster is the conditions which exist at present in the Market Hall and Church Street open air market. My report dated February, 1954, has so far not yielded tangible fruit. Food traders in the City frequently draw the attention of your public health inspectors to the unsatisfactory conditions in the Market Hall.

Public Abattoir

In spite of the obsolete buildings, etc., a reasonable standard of hygiene was maintained at the Public Abattoir throughout the year.

Lack of proper cooling facilities for carcases, etc., continue to cause concern to your health officers and the traders.

Sampling and Analysis of Food and Drugs for Adulteration, etc.

The following tables indicate the number and type of samples of food and drugs submitted for analysis during the year.

MILK

Number of Samples Taken	Number of poor quality (not adulterated)	Deficient Legal proceedings not considered warranted	Obviously Adulterated
Formal 106	11	11	—

	Milk Fat	*Non-fatty Solids*	*Water*
Average for the year	3.71%	8.56%	87.73%
Legal minimum standards	3.00%	8.50%	88.50%

Analysis of Other Food and Drugs

Samples of the following foods were submitted for analysis during the year:—

Food or Drug	*No. of Samples Taken*	*Not Genuine*
Beef, Potted	1	—
Butter	2	—
Butter, Peanut	1	—
Butter, Rum	1	—
Cheese, Lemon	1	1
Cheese Spread	1	—
Cheese and Onion Spread	1	—
Cocoa	1	—
Coffee	1	—
Condiment, Non-brewed	1	—
Cream	1	—
Curd, Orange	1	—
Essence, Coffee and Chicory	1	—
Flour, Self Raising	2	—
Gin	2	—
Honey	2	—
Improver, Gravy	1	—
Jam	1	—
Jelly, Table	2	—
Juice, Lemon	1	—
Lard	2	—
Margarine	5	2*

Marzipan	1	—
Mayonnaise	1	—
Milk, Condensed	1	—
Milk, National Dried	2	—
Mincemeat	2	—
Mint, Garden	1	—
Mixture, Cake	1	—
Mixture, Sponge	2	—
Nutmeg, Ground	1	—
Paste, Turkey and Tongue	1	—
Pepper, White	1	—
Peel, Cut	1	—
Pie Filling, Lemon	1	—
Powder, Baking	1	—
Powder, Curry	1	—
Pudding, Christmas	1	—
Rice, Cremola	1	—
Sauce	2	—
Sauce, Tomato	1	—
Sherry, Cream	1	—
Soda, Bi-carbonate of	2	—
Suet, Beef	1	—
Sweets	3	—
Tea	1	—
Vinegar, Malt	1	—
Whisky	2	—
Wine, Ruby	1	—

* Both informal samples of imported margarine. One sample contained a prohibited preservative and the other was deficient in butter fat.

WATER SUPPLY

Sources, Purification and Distribution

No alterations in the sources of supply of water were made during the year. The water, which is partly moorland surface water from the Council's own catchment area, and partly from Manchester's Thirlmere supply, is subjected to mechanical filtration and chlorination.

14,363 dwelling houses have an internal piped supply; one block of 6 houses and another block of 3 houses rely on a common standpipe for each block. One house is supplied by a spring and 1 from a stream. These latter houses are situated in the rural part of the area, and it has not been reasonably practicable to provide a piped supply.

Sampling of Tap Water

Nine samples of tap water from houses were submitted for analysis and 30 for bacteriological examination. The reports, abstracts of which are given in the following tables, indicate that the supply was satisfactory.

Extracts from Reports on Chemical Examination of Tap Water

Test	22.2.56	22.2.56	22.2.56	14.5.56	14.5.56	14.5.56	19.9.56	19.9.56	19.9.56
Colour	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Turbidity	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Oxygen Absorbed	0.037	0.028	0.042	0.045	0.080	0.018	0.033	0.061	0.084
Free and Saline Ammonia	Nil	Nil	0.002	Under 0.001	0.001	Under 0.001	Under 0.001	Under 0.001	Under 0.001
Albuminoid Ammonia	0.005	0.002	0.002	0.004	0.004	0.002	0.002	0.004	0.004
Nitrous Nitrogen	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Nitric Nitrogen	0.049	0.063	0.071	0.037	0.052	0.037	0.042	0.034	0.042
Chlorides	1.1	1.0	0.5	1.1	1.0	1.0	0.8	0.9	0.8
Hardness Clarke's Method: Temporary	1.0	1.0	0.5	0.5	1.0	0.5	1.0	1.0	1.0
Hardness Clarke's Method: Permanent	2.5	2.5	2.5	3.5	3.5	3.0	3.5	2.5	2.5
Hardness Clarke's Method: Total	3.5	3.5	3.0	4.0	4.5	3.5	4.5	3.5	3.5
Reaction, pH	7.2	7.4	7.1	7.6	7.4	7.3	8.5	7.4	7.4
Solids in Solution	6.0	8.0	14.0	10.0	14.0	8.0	4.0	9.0	3.0
Action on Lead	Under 0.01	Under 0.01	Under 0.01	Under 0.01	Under 0.01	Under 0.01	Under 0.01	Under 0.01	Under 0.01
Fluoride	0.03	0.05	0.05	0.06	0.06	0.06	0.08	0.08	0.01

EXTRACTS FROM REPORTS ON BACTERIOLOGICAL EXAMINATION OF TAP WATER

Date	Aerobic micro organisms growing in yeastral agar	Probable No. of coliform organisms per 100 c.c. of water	Ward sample taken	Re-marks
	In 2 days at 37°C.			
31.1.56	2	Nil	Scotforth	
	Nil	Nil	John o'Gaunt	
	Nil	Nil	Skerton West	
22.2.56	Nil	Nil	Scotforth	
	Nil	Nil	Scotforth	
	Nil	Nil	Skerton West	
7.5.56	Nil	Nil	Skerton West	
	Nil	Nil	John o'Gaunt	
	2	Nil	Scotforth	
14.5.56	2	Nil	Scotforth	
	Nil	Nil	Scotforth	
	1	Nil	Skerton West	
18.6.56	1	Nil	Scotforth	
	Nil	Nil	John o'Gaunt	
	Nil	Nil	Park	
9.7.56	Nil	Nil	Scotforth	
	Nil	Nil	John o'Gaunt	
	1	Nil	Skerton East	
29.8.56	Nil	Nil	Scotforth	
	Nil	Nil	John o'Gaunt	
	Nil	Nil	Skerton West	
19.9.56	Nil	Nil	Scotforth	
	1	Nil	John o'Gaunt	
	4	Nil	Skerton East	
8.10.56	Nil	Nil	Skerton West	
	Nil	Nil	John o'Gaunt	
	Nil	Nil	Scotforth	
28.11.56	Nil	Nil	Queens	
	Nil	Nil	John o'Gaunt	
	Nil	Nil	Skerton East	

BACTERIOLOGICAL EXAMINATION OF SWIMMING BATH WATER

Twenty-six samples of swimming bath water were submitted for bacteriological examination and extracts from the reports are given below :—

Date	Aerobic micro-organisms growing in yeastral agar 2 days at 37°C.	Prob. No. of coliform organisms per 100 c.c. of water	Bath from which sample was taken	Remarks
31.1.56	Spread'g growth	Nil	Corp'n Minor Plunge	
22.2.56	30	Nil	Corp'n Minor Plunge	
7.5.56	2	Nil	Corp'n Minor Plunge	
	Spread'g growth	Nil	Corp'n Major Plunge	
14.5.56	7	Nil	Corp'n Minor Plunge	
	25	13	Corp'n Major Plunge	
	Nil	Nil	L.R.G.S.	
18.6.56	Spread'g growth	Nil	Corp'n Major Plunge	
	1	Nil	Corp'n Minor Plunge	
	18	8	L.R.G.S.	Chlorination plant out of order
27.6.56	Nil	Nil	L.R.G.S.	
	Nil	Nil	Corp'n Minor Plunge	
	Nil	Nil	Corp'n Major Plunge	
9.7.56	Spread'g growth	Nil	L.R.G.S.	
	Nil	Nil	Corp'n Minor Plunge	
	Nil	Nil	Corp'n Major Plunge	
25.7.56	Nil	Nil	Corp'n Minor Plunge	
	550	Nil	Corp'n Major Plunge	
15.8.56	200	Nil	Corp'n Minor Plunge	
	2	Nil	Corp'n Major Plunge	
29.8.56	6	Nil	Corp'n Minor Plunge	
	2	Nil	Corp'o Major Plunge	
19.9.56	16	Nil	Corp'n Minor Plunge	
	60	5	Corp'o Major Plunge	
18.10.56	Nil	Nil	Corp'n Minor Plunge	
28.11.56	Nil	Nil	Corp'n Minor Plunge	

Prevention of Damage by Pests Act, 1949

Details of the premises visited, number found to be infested, and information concerning treatment are given in the following tables :—

SURFACE TREATMENT

	TYPE OF PROPERTY				
	Non-Agricultural				
	Local Authority (1)	Dwlng. Houses (incldg. Council Houses) (2)	All Other (incldg. Business P'mises) (3)	Total of Cols (1), (2) & (3) (4)	Agricultural (5)
I. Number of properties in Local Authority's District	22	13,772	2,569	16,363	20
II. Number of properties inspected as result of:					
(a) Notification	2	82	44	128	—
(b) Survey under the Act	11	–	499	510	25
(c) Otherwise (e.g. when visited primarily for some other purpose)	—	—	—	—	—
III. Total inspections carried out —including re-inspections	26	639	985	1,650	53
IV. Number of properties inspected (in Sect. II) which were found to be infested by:					
(a) Rats — Major	—	–	2	2	—
(a) Rats — Minor	1	13	10	24	—
(b) Mice — Major	1	2	12	15	—
(b) Mice — Minor	—	46	34	80	—
V. Number of infested properties (in Sect. IV) treated by Local Authority	2	61	58	121	—
VI. Total treatments carried out —including re-treatments	2	61	58	121	—
VII. Number of notices served under Sect. 4 of the Act.:					
(a) Treatment	—	—	—	—	—
(b) Structural Work (i.e. proofing)	—	—	—	—	—
VIII. Number of cases in which default action was taken following the issue of a notice under Sect. 4 of the Act	—	—	—	—	—
IX. Legal proceedings	—	—	—	—	—
X. Number of "block" control schemes carried out	—	—	—	—	—

SEWER TREATMENT

Total number of manholes in the City: 1,470.

Treatment Number: No. 9, No. 10.

Dates of Treatment: No. 9, 30-11-55 to 13-3-56 ; No. 10, 24-4-56 to 21-6-56.

Bait bases and poison used: No. 9, Sausage Rusk and Zinc Phosphide ; No. 10, Bread Mash and Arsenious Oxide.

Number of manholes baited: No. 9, 502 ; No. 10, 467.

Number of manholes showing prebait take: No. 9, 133 ; No. 10, 112.

Number of manholes showing complete prebait take (on one or both days): No. 9, 94 ; No. 10, 98.

Scheme of baiting used (e.g. consecutive days, or 1st, 3rd, and 5th days): Consecutive.

Test baiting: Number of manholes tested—No. 9, Nil ; No. 10, 144.
Number of tested manholes showing bait take—No. 9, Nil; No. 10, 12.

Disinfection and Disinfestation of Premises, etc.

Information concerning the disinfection and disinfestation of premises and articles carried out during the year is given in the following tables:—

DISINFECTION (PREMISES)

Premises Disinfected.			Single Rooms Disinfected.		
No. of Whole Houses.	No. of Ships.	No. of other Premises	In Houses.	In Ships.	In other Premises.
27	Nil	Nil	34	Nil	Nil

DISINFECTION (BOOKS AND OTHER ARTICLES)

Books Disinfected.		Other Articles.	Articles Destroyed.	
Public Library.	Private Library.		Books.	Other Articles.
97	1	18	Nil	10

Insect Pest Control

Fourteen houses, 1 Council owned and 13 others, 19 other premises and 12 single rooms were disinfested by means of liquid insecticides, and 16 vans of furniture were fumigated with HCN during rehousing operations. Fuller information is given in the table below .

Type of premises treated	Type of Infestation.					Single Rooms
	Fleas	Flies	Ants	Cock-roaches	Others	
Corporation Houses	—	—	—	1 2 rooms	—	1
Other Houses	2 9 rooms	—	5 10 rooms	5 11 rooms	1 2 rooms	10
Other Premises	--	2 14 rooms	2 9 rooms	13 160 rooms	4 5 rooms	1
Totals	2 9 rooms	2 14 rooms	7 19 rooms	19 173 rooms	5 7 rooms	12

LEGAL PROCEEDINGS

Acts, Byelaws or Regulations under which proceedings were instituted	Offence	Result	Fine	Costs
Public Health Act, 1936, Sec. 39	Non-compliance with Statutory Notice	Withdrawn on payment of 4/6 costs	—	4/6
Public Health Act, 1936, Sec. 93	do.	Conviction	£2.2.0	
Public Health Act, 1936, Sec. 93	do.	Nuisance Order made	—	4/6
Public Health Act, 1936, Sec. 93	do.	Withdrawn on payment of 3/6 costs	—	3/6

SECTION " E "

PORT HEALTH

LANCASTER PORT HEALTH AUTHORITY

The use of the port is mainly confined to a small amount of coastal traffic and similar cargo boats from the Continent. In view of this the more elaborate arrangements required in a larger port are not called for here.

Section I—Staff

Name of Officer	Nature of Appointment	Date of Appointment	Qualifications	Any other appointments held
Robert W. Farquhar	Port M.O.H.	1.7.52	B.Sc. (Agri.), M.B., Ch.B., D.P.H	Divisional M.O.H., Health Division No. 2 M.O.H., Carnforth U.D.C. M.O.H., City of Lancaster M.O.H., Lancaster R.D.C. M.O.H., Lunesdale R.D.C.
Frederick Shaw	Inspector to Port Health Authority	1.12.43	Cert. of R.S.I. & S.I. Joint Board; D.P.A.; M.R.S.H., A.M.I.P.H.E.	Chief Public Health Inspector, City of Lancaster

Section II

Amount of Shipping Entering the District During the Year

Ships from	Number	Registered Tonnage	Number Inspected		Number of Ships reported as having or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Public Health Inspector	
Foreign Ports	8	1,909	—	8	—
Coastwise	33	8,846	—	—	—
TOTAL	41	10.755	—	8	—

Section III

Character of Shipping and Trade During the Year

Passenger Traffic	Number of passengers INWARDS	Nil
	Number of passengers OUTWARDS	Nil
Cargo Traffic	Principal IMPORTS:	Clay, Linseed Oil, Zinc White, Veneer, Sand, Gravel, China Clay, Fertilizers.
	Principal EXPORTS:	Coke Breeze.
Principal Ports from which ships arrive:—		
	Foreign	Portugal, France, Holland.
	Coastwise	Liverpool, Greenock, Clay Ports, Cornwall.

Prevention of Damage by Pests Act, 1949

Prevention of Damage by Pests (Application to Shipping) Order, 1951

Number of Rodent Control Certificates issued — 18.

Result of Inspections—Action Taken by Port Health Inspector

Verbal warning given to master of one ship for dirty galley.

MINISTRY OF HEALTH
LIBRARY

Allan Sharpe & Co., Printers, George Street, Lancaster.